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AUTHOR Clarkson, Glenn; Warpinski, Robert
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ABSTRACT

This report provides a selection of examples of National Diffusion Network participant forms utilized between Developer/Demonstrators, State Facilitators, and Local Educational Agencies. They were selected to demonstrate variety and to be a source of ideas for others. Forms are grouped in five categories: needs assessment, adoption agreement, installation monitoring, adoption program evaluation, and newsletters. (DAG)

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FORMS AND FORMALITIES

A RESOURCE

U.S. DEPARTMENT OF HEALTH
EDUCATION & WELFARE
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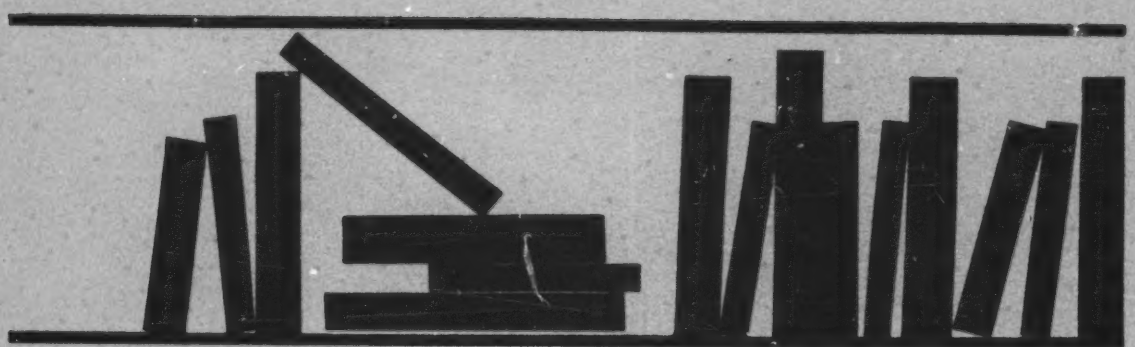
Compiled by
Glenn Clarkson
and Robert Warpinski



IR004966

NDN

NATIONAL DIFFUSION NETWORK • UNITED STATES OFFICE OF EDUCATION

EDITORIAL COMMENTS

After viewing numerous forms we felt we should share a few of our impressions with fellow NDN participants. These comments are to be interpreted as ours only, not representing the NDN. We don't know the answers, we are just raising the questions.

It appears that broad-based decisions need to be made regarding the amount and kind of data SF's and DD's need to be collecting.

Some projects have forms from A to Z. Does the use of numerous forms detract from NDN's major intent by discouraging LEA's participation? Can the necessary data be obtained with less time and paper involvement? Do the projects utilizing the greater number of forms produce "better" adoptions? It appears excessive use of forms with LEA's could add fuel to the "red tape" image of federal programs.

A common characteristic of the forms is the lack of title or purpose being clearly stated and to whom is to be returned. We realize the forms generally go out with a cover letter, but once they get separated the form loses its usefulness.

As a public relations point, forms going to LEA should be easy to read and have adequate space for completing responses. Some forms have formats that are hard to follow and generally hard to read. Checking categories is preferred over completion-type responses, where practical.

A few comments will be made on brochures even though they are not included. First level awareness brochures should be: inexpensive, attractive, informative, easily reproduceable, and in a format reflecting the individual program. Several projects have excellent brochures that are too expensive to be utilized in quantities needed for first level awareness. In order for SF's to adequately disseminate information about DD's, first level awareness

material is needed in very large quantities for mass mailings and use at conferences. If the format is of a type that can be reproduced easily, this helps greatly or if the DD can provide the brochures in large quantities (thousands), then a much better dissemination effort can be carried out.

The New Jersey State Department brochures are very good, but projects lose their individuality because of the number of projects using the same format. They need more than a change in the color of paper. Large, oversize brochures tend to not be kept as they are awkward to house and circulate within local districts.

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NDN FORMS AND FORMALITIES

A Resource and Reference Guide

INTRODUCTION

The following materials are examples of Network participant forms utilized between DD's, SF's, and adopting LEA's. These examples were selected from a larger number provided to the editors and selection committee. The selection of examples for inclusion within this booklet was based on an attempt to demonstrate variety and a potential source of ideas for others. In several cases, only portions of a project's forms are included. This was done because it contained a unique item, but at the same time there was a desire to reduce the total volume to a minimal amount.

The groups of forms selected for inclusion were:

1. Needs Assessment
2. Adoption Agreement
3. Installation Monitoring
4. Adoption Program Evaluation
5. Newsletters

In the first four sections enumerated, the forms are arranged by DD and SF grouping, or mixed category. The order of listing does not imply priority or status of the form, but a rather arbitrary choice starting with single page forms and ending with more detailed instruments of several pages.

Several other categories were considered for inclusion, but were dropped because of a variety of reasons. Gathering up student impact data forms were considered, but very little could be located that was not specific to a particular project and had little transfer value. Fiscal policy forms utilized by SF's and DD's were unique to their applicant LEA board rules and

procedures. Internal Project "housekeeping" or data recording forms were likewise unique and specific to local project needs.

Brochures by DD's and SF's would have provided useful models for each other to examine. The reproduction of the brochure within a booklet of this type proved very difficult without loss of the brochure individuality. A sharing of brochures at a regional or national NDN conference would provide a better media of exchange.

No one form included has been selected as a perfect model for everyone to copy and utilize. Any form must serve your local need in the most convenient manner. This sample collection is provided with the intent of presenting alternative approaches for data collection. Pick, choose, and modify as your needs dictate.

The willingness of DD's and SF's to provide samples for consideration was greatly appreciated. Numerous samples were received and not included. To these participants we extend a special thank you. Where the sources of the samples are known, the name is included on it.

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Nebraska - Iowa (SF)

Wisconsin Center for Innovative Programs (SF)

Illinois (SF)

Texas, Region 10 (SF)

EARLY CHILDHOOD PREVENTIVE CURRICULUM DEMONSTRATION CENTER

Dade County Public Schools
150 N. E. 19th Street
Miami, Florida 33132
(305) 350-3712

POTENTIAL ADOPTER NEEDS ASSESSMENT

The following criteria are to be considered by a school district in the decision making process for adoption of this program model.
The project can assist district decision makers to develop plans for partial adoption or adaption of the model if such is warranted by adopter needs.

	Yes	No
1. High rate of unsuccessful first graders in previous years.		
2. Ability to limit model class size to 20 high risk students		
3. Experienced primary teacher willing to implement the program		
4. Availability of full-time paraprofessional aide.		
5. Parental support of program.		
6. Community/School Board support of program		
7. Administrative support at the district level.		
8. Administrative support at the school level.		
9. Availability of supervisory personnel for ongoing support of program.		
10. Primary classroom available for model.		
11. Availability of specified curriculum materials.		
12. Funding capabilities to support program are available		

I-C-E DEVELOPER/DEMONSTRATION PROJECT
ENVIRONMENTAL EDUCATION STAFF INTEREST CHECKLIST

Dear Teacher:

Under an ESEA, Title III, Section 306 grant from the U.S. Office of Education, Project I-C-E (Instruction-Curriculum-Environment) can provide inservice and technical assistance to teachers in other schools with a demonstrated need and interest in adopting/adapting an environmental education program. We can service a limited number of schools, hence, to help us and your school system determine level of need and interest, please complete this simple checklist. Please provide the information at the bottom of the form for our records and potential rostering. Your responses are confidential information and will in no way jeopardize your status or position.

	Yes	Sometimes/ Maybe	No
1. Maintaining environmental quality must be of concern to all individuals.	_____	_____	_____
2. Education at all levels should be directed toward environmental issues.	_____	_____	_____
3. A school system should have a general philosophy supporting environmental education.	_____	_____	_____
4. All teachers should include environmental instruction as part of their course of study.	_____	_____	_____
5. As a teacher I do include environmental units/activities in my classes.	_____	_____	_____
6. Environmental curriculum materials and instructional strategies would help me teach environmentally.	_____	_____	_____
7. I would be interested in investigating different approaches to environmental education.	_____	_____	_____
8. I would be willing to commit a reasonable part of my instructional effort to adopt/ adapt the essential core of an environmental education program.	_____	_____	_____

Comments: (Use other side of sheet.)

Please provide the following information:

Name _____

Grades/Subjects you teach _____

School/District _____

Please return to school office promptly--thank you.

STRATEGIES IN EARLY CHILDHOOD EDUCATION

Survey of Project Objectives

Directions: Please check the appropriate box on the right that best reflects your classroom practices.

Name _____ Date _____

Grade _____ School _____ District _____

	MY TEACHING IS DEPENDENT UPON THIS.	I HAVE BEGUN TO INCORPORATE IN MY TEACHING.	I AM UNDECIDED ABOUT THIS APPROACH.	I AM UNAWARE OF THIS APPROACH.	I KNOW ABOUT THIS, BUT AM UTILIZING ANOTHER STRATEGY.
The theoretical model and concepts regarding development in the following areas are utilized as basic curricular objectives for children:					
1. Visual					
2. Auditory					
3. Verbal					
4. Motoric					
The Early Childhood Assessment Instrument is given to my classroom and the results are profiled.					
In connection with the assessment the Chart of Sequenced Objectives is followed in developing daily lesson plans.					
Classrooms reflect a diagnostic-prescriptive program with structured learning centered activities.					
1. Centers related to visual, auditory, motoric, and verbal objectives.					
2. Centers related to cognitive levels.					
3. Centers have self-correcting teacher-made materials.					
4. Centers incorporate commercial materials.					
Prescription periods are structured where children are assigned to centers and where self-selection of centers is also encouraged.					
The Chart of Pupil Progress is maintained in order to indicate pupil progress towards prescribed goals as well as to plan prescriptive programs.					
Parent involvement:					
1. Individual conferences are based upon child's progress according to the Chart of Objectives.					
2. Parent volunteers assisting in the screening.					
3. Parent volunteer aides assisting in the classroom.					
4. Group meetings for parents to explain the individualized program.					

SAMPLE

ECOS TRAINING INSTITUTE

1. Official School District's Name _____

2. Address _____

_____

_____ ZIP _____

3. Phone _____

4. Name of Superintendent _____

5. Name and Position of Respondent _____

_____

6. Respondent's Phone _____

DESCRIPTIVE VARIABLES

1. Please indicate the approximate population size of the area served by your school district according to the 1970 U.S. Census.

____(A) Less than 10,000
____(B) 10,000 - 25,000
____(C) 25,000 - 49,999
____(D) 50,000 - 99,999
____(E) 100,000 - 499,999
____(F) 500,000 - 1,000,000
____(G) More than 1,000,000

2. How would you characterize your district?

____(A) Urban
____(B) Suburban
____(C) Rural

3. How many schools comprise your school district? (write number of schools for each level)

_____ Elementary schools

_____ Junior High/Middle schools

_____ High schools

_____ Other (specify: _____)

4. Please indicate the per pupil instructional expenditures of your school district. (Do not include capital expenditures)

____(A) Less than $750
____(B) $750 - $1500
____(C) More than $1500

5. What is the average teacher salary in your school district (1973-74 year)?

____(A) Less than $7,500
____(B) $7,500 - $8,499
____(C) $8,500 - $9,499
____(D) $9,500 - $10,499
____(E) $10,500 - $11,500
____(F) More than $11,500

6. Please indicate your total school district enrollment.

____(A) Less than 300
____(B) 300 - 2,499
____(C) 2,500 - 4,999
____(D) 5,000 - 9,999
____(E) 10,000 - 25,000
____(F) More than 25,000

7. What is the approximate number of students per professional classroom teacher (student-teacher ratio) in your school district?

____(A) Less than 12
____(B) 12 - 15
____(C) 16 - 19
____(D) 20 - 24
____(E) 25 - 27
____(F) 28 - 31
____(G) 32 - 35
____(H) More than 35

8. What percent of your total 9th grade enrollment in 1971 graduated high school in 1974? (Do not include those who transferred in and out of the system.)

____(A) Less than 65%
____(B) 65% - 74%
____(C) 75% - 84%
____(D) 85% - 95%
____(E) More than 95%

9. To the best of your knowledge, what percentage of your 1974 high school graduates are enrolled in a post-secondary educational institution?

____(A) Less than 35%
____(B) 35% - 44%
____(C) 45% - 54%
____(D) 55% - 64%
____(E) 65% - 74%
____(F) 75% - 85%
____(G) More than 85%

10. How is the school district organized?

____(A) K-8, 9-12
____(B) K-6, 7-9, 10-12
____(C) K-5, 6-8, 9-12
____(D) Other (Specify: _____)
____(E) Not applicable

IN-SERVICE EDUCATION PROGRAM

1. Please indicate which of the following in-service education programs your district offers by placing a check mark in the appropriate box in Column A (Policy). For all those programs marked "Yes" in Column A, indicate the Structure and Frequency of each program by placing a check mark in the appriate boxes of Columns B (Structure) and C (Frequency).

	A		B		C		
	Policy		Structure		Frequency		
	Yes	No	Formal	Informal	Often	Occasionally	Seldom
(A) New teacher to system is assigned to work in the classroom of a more experienced teacher or staff member							
(B) Teachers participate in curriculum development							
(C) Coaching by supervisors							
(D) Workshops and conferences conducted by your school system							
(E) Workshops and conferences conducted by others outside school system for your staff							
(F) Participation in university courses to specific school disciplines							
(G) Planned teacher visits to other systems							
(H) Staff development days							
(I) Other (specify: _____ _____)							

2. Please indicate the incentives that you use to encourage participation in your in-service education program. (Check all that apply)

____(A) Released time from regular duties

____(B) Extra Pay

____(C) Condition of continued employment (attendance required)

____(D) In-house credit granted which can be applied toward an advancement in salary level

____(E) Other (specify:_____)

3. Is there a procedure in your district for evaluating outside academic course work for the purpose of determining teacher salary levels?

____Yes

____No

4. What is the basic <u>orientation</u> of your in-service education program? (Check only one)

____Discipline-oriented (primary interest is subject structure and content)

____Student-oriented (primary interest is in student outcomes)

ENVIRONMENTAL EDUCATION PROGRAMS

1. Place a check next to the statement(s) which best describe the status of Environmental Education programs in your school system. Then, in the right-hand column, place a check in the appropriate space(s) to indicate the grade level(s) of the program.

		Grade Level		
		Elem.	Jr.H.S.	H.S.
____(A)	An interdisciplinary Environmental Education program has been fully integrated into the curriculum	____	____	____
____(B)	A single Environmental Education course was given on an experimental basis last year	____	____	____
____(C)	A single Environmental Education course was given on an elective basis for at least one semester	____	____	____
____(D)	A single Environmental Education course was given on a required basis for at least one semester	____	____	____
____(E)	There is no single Environmental Education course but Units have been incorporated into on-going courses such as science and social studies	____	____	____
____(F)	There is no single Environmental Education course but the primary environmental emphasis has been on one or more of the following: (Check all that apply)			
	____Single Day activities (e.g., Earth Day, Arbor Day, etc.)	____	____	____
	____Field Trips	____	____	____
	____Resident (Camp)	____	____	____
	____Eco-Action Clubs	____	____	____
	____Monitoring activities (e.g. water air, noise, etc.)	____	____	____
	____Other (specify:_____ _____)	____	____	____
____(G)	Other (specify:_____ _____ _____)	____	____	____
____(H)	We have not really had a program in Environmental Education but we would like to	____	____	____

2. Briefly describe each Environmental Education program and characterize the students (slow, gifted, handicapped, etc.) participating in the courses.

_____

_____

_____

_____

3. Which of these do you consider to be the major restrictions upon your district's developing and carrying out an Environmental Education program? (Check all that apply)

____(A) No evident demand or need for such programs

____(B) Lack of interest among staff

____(C) Staff resistance

____(D) Suspicion of passing fad

____(E) Lack of funds

____(F) Lack of staff

____(G) Lack of planning time

____(H) Lack of curriculum materials

____(I) Other priorities (specify:_____)

____(J) Teacher contracts

____(K) Transportation

____(L) Staff qualifications in Environmental Education

____(M) District location

____(N) Curriculum restrictions

____(O) Length of school day

____(P) Other (specify:_____)

COMMUNITY INVOLVEMENT

1. Place a check next to the statement which best describes your school district's involvement with local industry, business, and/or community groups. (Check only one)

____(A) It is not in our plans to involve local industry, business, and/or community groups in our programs.

____(B) Local industry, business, and/or community groups would first have to be educated to the area's environmental needs before effective collaboration could take place, and the school district is capable of carrying out this educational campaign.

____(C) Local industry, business, and/or community groups would first have to be educated to the area's environmental needs before effective collaboration could take place, but assistance from ECOS Training Institute would be needed to carry out this educational campaign.

____(D) There already are active forces in the community ready and willing to cooperate with the school district but there has been no previous history of cooperation between these groups and the school district.

____(E) There already are active forces in the community ready and willing to cooperate with the school district and there has been a history of cooperation between these groups and the school district.

____(F) The school district has had a history of collaboration and cooperation with local industry, business, and/or community groups on non-environmental programs and thus, the school district has the necessary expertise to seek community involvement in Environmental Education programs.

____(G) The school district has had a history of collaboration and cooperation with local industry, business, and/or community groups on non-environmental programs, yet this experience is not seen as giving the district the foundation necessary to seek community involvement in Environmental Education programs.

____(H) The school district already has a cooperative Environmental Education program involving local industry, business, and/or community groups.

2. What community interests could conceivably become interested and involved in the activities generated by future educational projects? (Check all that apply)

____(A) Conservation advisory councils
____(B) Local industry
____(C) Local planning, zoning, and urban renewal boards
____(D) Local citizens groups
____(E) Local service groups
____(F) Local chapters of national environmental groups
____(G) Local institutions of higher education
____(H) Other (specify: _____)

3. Would your school district be interested in helping to develop a group of concerned citizens (i.e., Citizen's Committee for Environmental Education) to work with the school on matters pertaining to environmental concerns of the community as they relate to education?

____(A) Yes
____(B) No
____(C) Uncertain at this time
____(D) We are already involved with just such a group

4. Please indicate the percentage of "yes" votes on the school budget over the past three years. (Check one space in each column). If not applicable to your district, please leave this question blank.

Percentage	1971-72	1972-73	1973-74
Less than 51%	(A)____	(G)____	(M)____
51% - 60%	(B)____	(H)____	(N)____
61% - 70%	(C)____	(I)____	(O)____
71% - 80%	(D)____	(J)____	(P)____
81% - 90%	(E)____	(K)____	(Q)____
More than 90%	(F)____	(L)____	(R)____

EDUCATIONAL APPROACHES AND STRATEGIES

1. Please check those educational approaches, methods, and programs from the following list which have been implemented in your school district. (Check all that apply)

____(A) Aesthetic Education
____(B) Alternative Schools (e.g. Parkway Project, Street Academies)
____(C) Black Studies
____(D) Career Education
____(E) Computer-Assisted Instruction (CAI)
____(F) Discovery Method (Inquiry Method)
____(G) Distar Reading and Language
____(H) Educational Parks
____(I) Environmental Education
____(J) Ethnic Studies
____(K) Extended School Year
____(L) Individually Prescribed Instruction (IPI)
____(M) Initial Teaching Alphabet (i.t.a.)
____(N) Instructional TV
____(O) Merit Pay
____(P) Micro-Teaching
____(Q) Middle Schools
____(R) Mini-Courses
____(S) Modular Scheduling
____(T) "New" English, Math, Social Studies, Physics, etc.
____(U) Non-Graded Schools
____(V) Open Classroom
____(W) Pass/Fail Grading System
____(X) Performance Contracting
____(Y) Program Planning Budgeting System (PPBS)
____(Z) Programmed Instruction
____(AA) Teacher Aides
____(BB) Team Teaching
____(CC) Voucher Plans
____(DD) Other (specify: _____)

2. For each of the items checked above, indicate the number of years each program has been in existence and whether the program is on-going or has been terminated.

_____

_____

_____

_____

3. Is money set aside in the budget which may be awarded to teachers so they may carry out special projects?

____(A) Yes
____(B) No

Workshop on Disruptive Youth
Attitude Instrument

This instrument has been designed so that you can provide us with information concerning workshop objectives. Please, respond to the numbered statements according to the following scale:

Strongly Disagree (SD)	Disagree (D)	Uncertain (U)	Agree (A)	Strongly Agree (SA)

_____ 1. I am familiar with the "behavior equation" as conceived by Dr. Ralph Ojemann.

_____ 2. I would categorize myself as an "affective teacher".

_____ 3. I can see how the "Curriculum for Meeting Modern Problems" would fit into my existing curriculum.

_____ 4. I am convinced that "affective" kinds of activities which focus on students' emotional health are an important component of a well-rounded curriculum.

_____ 5. I had little or no difficulty with student behavior in my work last year.

_____ 6. I am confident of my ability to handle the disciplinary situations which might arise in my work.

_____ 7. I am familiar with "Maslow's Hierarchy of Needs".

_____ 8. The "Curriculum For Meeting Modern Problems" should be adopted for use in my school system.

_____ 9. Young people are difficult to understand these days.

_____ 10. Most teachers are not severe enough in their dealings with pupils.

_____ 11. Discipline problems are my greatest worry.

_____ 12. "The Curriculum For Meeting Modern Problems" is a useful tool to minimize discipline problems.

_____ 13. Keeping discipline is not the problem that many teachers claim it to be.

_____ 14. Teachers can be wrong as well as students.

_____ 15. The "Curriculum For Meeting Modern Problems" can be helpful to me in understanding my own behavior.

_____ 16. To maintain good discipline in the classroom a teacher needs to be "hard-boiled".

_____ 17. I am familiar with the concept and strategies of "values clarification".

_____ 18. The "Curriculum For Meeting Modern Problems" can provide assistance to a teacher in understanding student behavior.

_____ 19. I am confident of my ability to create "affective activities" which focus on students' emotional health.

_____ 20. Aggressive children are problem children.

_____ 21. I think I now have some useful ideas to share with my colleagues concerning "affective teaching" and "maintaining classroom control".

_____ 22. I anticipate that if discipline situations occur in my classroom next year, I will be able to minimize their effect.

_____ 23. If students understood the causes and consequences of behavior it would decrease the amount of disruptive student behavior.

_____ 24. I intend to be more "non-judgemental" in my relationships with students.

_____ 25. Many discipline situations are escalated into crisis proportions by teachers who do not understand the causes of behavior.

TITLE III E. S. E. A. PROGRAM

A Training Questionaire

Please complete this questionaire in order to help us make our workshop(s) responsive to the needs of your school district.

Thank you!

The Dale Avenue Dissemination Team

---

1. Is it possible to meet the needs of each child in your classroom?

   [ ] Yes [ ] No

   Comments: _____

   _____

   _____

2. Can a performance objective curriculum help meet individual needs in a classroom?

   [ ] Yes [ ] No [ ] I need more information

3. In regard to meeting individual needs in the classroom:

   [ ] I have many techniques
   [ ] I have some techniques
   [ ] I could use help

4. I think that established grade norms are:

   [ ] Essential
   [ ] Unnecessary
   [ ] I need more information

5. Does training in academic skills affect social and emotional development?

   [ ] Yes
   [ ] No
   [ ] I need more information

6. My opinion about testing in general is _____

   _____

   _____

   _____

7. In regard to Criterion Reference Tests:

   [ ] I know a great deal
   [ ] I know a litte
   [ ] I would like to learn about them

8. In regard to Norm Reference Tests:

   [ ] I know a great deal
   [ ] I know a little
   [ ] I would like to learn about them

9. When should formal reading instruction begin?_____

10. When should formal math begin?_____

11. When should manuscript writing begin?_____

12. When should cursive writing begin? _____

13. In regard to performance objectives:

[ ] I think they are a good device for structuring a program.
[ ] I dislike them
[ ] I need more information about them

14. I would rate these teaching styles as follows:

	Very Effective	Fairly Useful	More Information Needed
Individualized Instruction	_____	_____	_____
Question and Answer	_____	_____	_____
Lecture to Whole Class	_____	_____	_____
Workbooks	_____	_____	_____
Manipulative	_____	_____	_____
Games	_____	_____	_____
Other Styles	_____	_____	_____

Comments about other styles:_____

15. I think that effective classroom management can:

[ ] Reduce behavior problems in classroom
[ ] Has little effect on behavior
[ ] I need more information

16. I think that class size:

[ ] Can affect teaching success
[ ] Has little affect
[ ] I need more information

17. I think the three R's are

[ ] A basic to all learning
[ ] Dependent on skills that are more basic
[ ] I would like more information

18. I think the room arrangement that is desirable for an individualized program is:

[ ] Straight rows
[ ] Other....Please specify in words or drawing!

_____

_____

[ ] I need more information

19. In regard to the ten (10) curriculum areas of the Dale Avenue Performance Objectives:

	Understand Very Well	I Have Some Idea	More Information Needed
Listening			
Naming			
Speaking			
Observing			
Perceptual Motor Skills			
Writing Motor Skills			
Math			
Encoding/Decoding			
Classification			
Seriation			

20. In regard to instituting the Dale Avenue Program in the classroom:

[ ] I'm rarin' to go.
[ ] I'm nervous about it but I'll try it anyway.
[ ] I really don't intend to use the program at all.

PRIORITY AREA NEEDS ASSESSMENT

se return as soon as possible. Address is on the reverse side for return.

rict's Name _____

of Person
iding Information _____

tion _____

the following curricula areas, please indicate the ten (10) which you feel your district need the most assistance with next year. Rank them one (1) through ten (10) with one (1) the most critical need. Use the space on the reverse side of this form for comments, tions, or other information which will help us become aware of your needs.

All Levels	Elementary	Junior High	Senior High	
				Reading
				Math
				Career Education
				Art-Culture
				Learning Disabilities
				Handicapped
				Pre-School(Parent Involvement)
				Early Childhood
				Bilingual-Ethnic Education
				Migrant
				Individualized Programs

Other curricula areas - please list.

_____

_____

_____

All Levels	Elementary	Junior High	Senior High	
				Vocational Education
				Physical Education
				Administrative Organization
				Alternative Education Program
				Student Self-Concept
				Decision Making-Value Clarification
				Environmental Education
				Guidance Programs
				Instructional Techniques
				Use of Community
				Social Sciences
				Language Arts

(See Reverse Side)

Nebraska and Iowa State Facilitator
Glenn Clarkson, Project Director
2407 Chandler Road
Bellevue, Nebraska 68005

Comments: _____

Fold on dotted line -
Staple and Return

WISCONSIN DISSEMINATION CENTER FOR INNOVATIVE PROGRAMS

EVIDENCE OF NEEDS

District/School Name _____

Name of Person Providing Information _____

Position _____

1. Check only those critical need areas for which your district has evidence of need.
   - ☐ Reading
   - ☐ Diagnosis & Evaluation of Student Learning
   - ☐ Motivation for Learning
   - ☐ Guidance/Counseling
   - ☐ Individualizing Instruction

2. By what means was the evidence developed? (Check all which apply.)
   - ☐ standardized testing
   - ☐ staff-developed, non-standardized testing
   - ☐ surveys, questionnaires
   - ☐ interviews
   - ☐ classroom observations
   - ☐ general school records (absenteeism, vandalism, etc.)

3. Which groups were involved in producing evidence of needs? (Check all which apply.)
   - ☐ teachers
   - ☐ school administrators
   - ☐ school board members
   - ☐ community representatives
   - ☐ students
   - ☐ parents

4. How available are your data?
   - ☐ published for the district; a report is available
   - ☐ a report is currently in process; data has been analyzed/interpreted
   - ☐ a report could easily be developed; data needs analysis/interpretation
   - ☐ a report would be difficult to develop; but data is available

5. Would you be agreeable to cooperatively investigate with the Wisconsin Dissemination Center for Innovative Programs nationally available programs suited to your needs? (Such agreement would not be a commitment at this time--only a sign of your interest.)
   - ☐ Yes
   - ☐ No
   - ☐ Maybe

MEDIA FIELD REPORT AND ANALYSIS

CONSULTANT_____

DATE_____

DISTRICT_____

LEA ☐ ESR ☐ NPS ☐

DD MODEL_____

_____

_____

ILLINOIS EDUCATIONAL REGION_____

CONTACT PERSON_____

SUPERINTENDENT_____

RATING FOR ADAPTATION

Superior ☐

Excellent ☐

Good ☐

Fair ☐

Poor ☐

Based on the Field Consultant's data collection and observation the above potential adoptor was rated by circling the most appropriate description.

A. 1.	Meet criteria established by DD	Yes	No	Partially	Uncerta	
2.	Underwriting portion of expenses	Yes	No	Partially	Uncerta	
3.	Inviting LEA, ESR, or NPS to participate in adaptation	Yes	No	Partially	Uncerta	
B. 4.	Adopter staff qualifications in implementing program	Superior	Excellent	Good	Fair	P
5.	Indications of follow through after Facilitator expires	Superior	Excellent	Good	Fair	P
C. 6.	Correlation between need and identified DD		High	Medium	Low	N
7.	Cost analysis/attendance center		High	Medium	Low	N
8.	Cost analysis per pupil according to model		High	Medium	Low	N
9.	Committment to design		High	Medium	Low	N
D. 10.	Geographical location	Region	I	II	III	IV	V	VI

COMMENTS:

Form AD-2

SF

CONSENSUS REPORT OF TRIAL ADOPTION TEAM

District _____ Campus _____ D/D Project _____

Local Needs the Developer/Demonstration Project will meet

Suitability of Developer/Demonstration project to your:

A. Building facilities (space, storage, furniture,etc.)

B. School population (what are likenesses and differences to Developer/Demonstration Project population)

C. Community setting (compared to Developer/Demonstration Project's setting)

D. Instructional organization of your school?

E. On hand materials, equipment, hardware, other resources (what you have/what you'll need)

Support and Committment for Successful Implementation

A. Administrative Support and Committment (all levels)
(How is this support evidenced?)

B. Faculty and Staff Support and Committment (Are most willing to give the extra time and effort this will require?)

IV. Meeting Developer/Demonstration Project's Requirement for Training and Implementatio

A. Do you have sufficient number of people willing to be trained?

B. Do you have district approval for these people to participate in training?

C. Are there any time considerations as to when your district wishes training?

D. Is your faculty agreeable to additional in-service spaced throughout implementat if required?

E. What is to be your organization within the faculty for implementation? (outline roles and responsibilities)

F. When would you begin implementing the Developer/Demonstration Project on your Campus?

G. In what ways might you seek parent and/or community involvement in implementing the Developer/Demonstration Project on your campus?

V. Other Considerations:

A. Funds for unexpected program expenses (small things like poster board or paper clips)

B. Expectations for continuance of program after this year.

C. What policy will you make regarding observation visits by other educators?

D. What are your biggest concerns regarding implementing the Developer/Demonstration Project on your campus?

E. Do you think these can be dealt with to your satisfaction?

F. Is this project worth getting into in spite of/because of all these considerations?

CONSENSUS REPORT OF TRIAL ADOPTION PHASE TEAM

The topics listed on this form as well as others the group may want to address, should be considered by the Trial Adoption Team. Consensus of the group should be sought and that consensus recorded on the form as approved by the group. When completed and reviewed the general tone of the entire Consensus Form should serve as a clear cut directive to your Trial Adoption Team as to the advisability of your school pursuing approval to become an adopter site in terms of being able to meet the committments you and your Superintendent will be asked to sign individually as well as as a school group.

When adequate time has been provided for discussing areas of concern and drafting a consensus statement about each concern, the Trial Adoption Team should then come to consensus regarding acceptance or rejection of further effort to become an adopter site.

Record that consensus--whether rejection or acceptance--in a letter, include a copy of the completed Consensus Form and return to the Facilitator Project at Region 10.

If you elect not to pursue adopter status your involvement with the Facilitator Project ends at that point.

If you elect to continue in your efforts to become an approved adopter, additional Trial Adoption Phase activities are outlined for you.

State Facilitator Project
Region 10, Texas
Form 3

PROFILE DATA SHEET FOR _____
(campus)

_____, Texas
(District)

I. Please state a rationale for selection of this project to adopt in your district.

II. School Population

Grades included on this campus _____

Total student population on this campus _____

Total professional staff number _____

How many students will be directly involved in this adoption? _____

How many teachers will be directly involved? _____

How many administrators will be directly involved? _____

How many aides will be directly involved? _____

Does your district have a specialist working in the area with which the Developer/Demonstrator project deals? _____

Please describe any expertise, experience or special interests among the faculty which you feel will be especially helpful during implementation of this program.

III. School Plant

Describe the physical structure of your building.

IV. Community Setting

Describe the socio-economic and status, geographical setting of your campus.

Describe the general level of parental/community involvement in your on-going school program.

V. Instructional Organization

Describe your instructional organization.

Do you anticipate any parent/community involvement in the adoption process?

State Facilitator Project
Region 10, Texas
Form 4

DISTRICT COMMITTMENT FORM

As a result of completing all activities and forms required during the Awareness and Trial Adoption Phases of Education Service Center, Region 10's Facilitator Project, we the undersigned are requesting to become an adopter school of the _____ developed in _____.
D/D Project City, State

We pledge to meet all training and implementation requirements and responsibilities to successfully implement this educational program on our campus. Financial support of this adoption will be as indicated in the Facilitator's Committment Form.

Signed: _____
District Superintendent

Signed: Trial Adoption Team Members

_____
(name, position)

_____
(name, position)

_____
(name, position)

_____
(name, position)

_____
(name,position)

STATE FACILITATOR PROJECT COMMITTMENT FORM

EDUCATION SERVICE CENTER, REGION 10

Having met all criteria of Education Service Center, Region 10's State Facilitator Project to participate in the adoption of a Developer/Demonstrator Project, Education Service Center, Region 10 hereby makes the following committments to the _____ (school district) for the purpose of implementing Developer/Demonstrator Project, _____ (Name of Program), _____ (Place of Development), or the _____ (Name of School) school campus.

1. The Region 10 State Facilitator Project will reimburse the school district in keeping with the district's pay scale, for _____ (number) days of substitute pay in order that _____ (number) classroom teachers may be released from classroom duties to receive the required program implementation training.

   (No substitute pay will be provided other than for released training time for classroom teachers.)

2. The Region 10 Facilitator Project will pay _____cents per mile, for_____ car's travel cost or where appropriate, coach class airline costs for each training participant.

3. The Region 10 Facilitator Project will pay housing expenses and $10 per day to cover food expenses incurred during the training period for _____ (number) approved training participants.

4. The Region 10 Facilitator Project will provide funds to cover expenses of _____ (number) of its staff person(s) to receive required program implementation training in order to meet any monitoring requirements of the Developer/Demonstrator and/or guidelines of the Facilitator Project.

5. The Region 10 Facilitator Project will pay for required training materials not supplied by the Developer/Demonstrator Project.

6. The Region 10 Facilitator Project will provide required program implementation materials for student use not to exceed a cost of $_____.

7. The Region 10 Facilitator Project will not provide funds to cover cost of any capital outlay items.

8. Appropriate professional assistance and support during the adoption process will be provided to adopter schools by Education Service Center, Region 10's Facilitator Project Staff.

_____
Date

_____
Mrs. Gwyn Brownlee
Facilitator Project Director
Education Service Center, Region 10

STATE FACILITATOR PROJECT COMMITTMENT FORM

EDUCATION SERVICE CENTER, REGION 10

This form will be completed and returned to the district by the State Facilitator Project Director when the school district has completed all of the activities outlined in the Trial Adoption Phase of the Facilitator Project of Region 10, and submitted to the project staff all of the required forms. All forms, including this one, must be completed prior to participation in program implementation training.*

*See listing of Trial Adoption Activities Forms, (pp. 1)

State Facilitator Project
Region 10, Texas
Form 6

DEVELOPER/DEMONSTRATOR ADOPTER APPROVAL

The _____ School, _____, Texas _____
(is, is not)

approved as a adopter site for the _____.
Developer/Demonstrator Project

For those schools approved as adopter sites, planning for training and implementation of our program on their campus should begin immediately.

Signed: _____
Project Director

Note to Project Director:

Please indicate reasons for withholding approval. Indicate any reservations you might have even though approval is given.

Part II Adoption/Adaption Agreements

Project Home Base (DD)

Project Success (DD)

Early Childhood Preventive Curriculum Model (DD)

Project I-C-E (DD)

Institute for Political and Legal Action (DD)

Pegasus - Pace (DD)

Connecticut Facilitator Project

New Mexico State Facilitator

New York State Facilitator

Wisconsin Dissemination Center for Innovative Programs

Part II-A Multiple Use Forms (assessment, applications, agreements)

Project Adventure (DD)

Hawaii English Program (DD)

Focus Dissemination Project (DD)

EIC Project (SF)

Oklahoma State Facilitator

Florida Facilitator Center

Project Home Base
Yakima Public Schools
Yakima, Washington

LETTER OF AGREEMENT BETWEEN _____ AND PROJECT HOME BASE

I. PARTIES INVOLVED:

_____ School District

_____ State Facilitator - Optional

PROJECT HOME BASE, YAKIMA, WASHINGTON

II. INTENT OF THIS AGREEMENT:

The intent of this agreement is to define the responsibilities of the above parties in relationship to replication of Project Home Base by

_____.

III. RESPONSIBILITIES:

A. Leadership Conference (optional) to be of _____ days duration on _____ (date) for _____ people at Demonstration Site, Yakima, Washington.

Financial Arrangements:

B. Training Workshop to be of _____ days duration on _____ (date) for _____ people at _____ (Demonstration or Adopter Site).

Financial Arrangements:

C. Certification of adoption will be done through a Follow-up Contact, which will take place at the adopting site on _____ (date).

Financial Arrangements:

_____
Signature of Superintendent or Authorized Personnel

_____
Signature of Project Home Base Personnel

_____
State Facilitator - Optional

_____
Yakima School District Sup't.

_____ Date

_____ Date

MEMORANDUM OF AGREEMENT

Whereas the Lyons Public School wishes to adopt and implement the instructional program for mastery of certain skills known as Project Success (Title III, E.S.E.A.) sponsored by the Wayne Public Schools, and whereas Project Success is prepared to assist that School to adopt and implement the Project Success program, these two parties enter into the following agreement.

Section I

The adopting School agrees to carry out the following responsibilites and activities to the best of its ability.

1. To appoint a Local Program Manager who will be responsible with the Principal for implementing the program at the local level. The Principal can be the Program Manager.

2. Attend the training sessions provided by Project Success during July, 1975.

3. Complete a Local Adoption Plan which shall include:
   (1) Status Report (2) A timeline for implementation of Project
   (3) A listing of the duties of the LPM.

4. Purchase adequate amounts of necessary materials.

5. Reproduce in adequate amounts and quality the materials necessary for implementation of the program.

6. Install the program at least at the following minimum level:
   (1) Organize classes into Language Arts Blocks of time
   (2) Include all SLD students that have been identified and that have parental approval to placement in the class
   (3) Record student progress on Hierarchy of Skills Charts
   (4) Group students with like instructional needs
   (5) Monitor student progress through criterian reference teaching.

7. Install and operate the program through at least the end of the 1975-76 school year.

8. Collect data on program use and effectiveness as required by the Evaluation Plan, and report this data to Project Success as well as the State Title III office by June 15, 1976. Recommended forms to use are:
   (1) Description of the implementation of the program.
   (2) Assessment of program effectiveness by
      (a) Status report at beginning of program which will include
         ...Pre-test results
         ...description of program used
         ... description of use of volunteers and aides in program
         ...a listing of frequently used materials and their use
         ...a description of the general method by which the program was evaluated and the tools used (such as standardized tests)

(b) Post-Test results
(c) Teacher Attitude toward Project Success shown by results of an attitude test to be given at the end of the school year.

9. Conduct at least two organized efforts to inform parents of the community about the program.

Section II

Project Success agrees to carry out the following responsibilities and activities to the best of its ability.

1. Furnish all Project Success manuals and models for use by adopting School, except that it is understood that:
   (a) The adopting School is responsible for reproducing materials for instructional use.
   (b) The adopting School is responsible for purchasing either the Merrill Linguistic or the Palo Alto Reading Program.

2. Provide consulting and further training time in the adopting School by Project Success staff members between September, 1975 and April 30, 1976.

3. Provide an Implementation Checklist and an Implementation Report to be used by the school as a part of their Evaluation Report to the State Title III office.

4. Provide immediate telephone consultation to adopting Schools, and additional personal consultation at the local school in emergency situations.

5. Hold in strictest confidence any information obtained during visits to adopting Schools or from reports submitted by adopting Schools in that any use of this information will be designed to prevent the identification of any school with any information.

Section III

It is further agreed that the following considerations apply to this agreement.

1. The adopting School will pay their travel and expenses for inservice and consultation services.

2. Project Success will pay their travel and expenses for consultation to the adopting school.

Date 9-10-75 _____ (name)

_____ (position)

for the Adopting School

Director, Project Success Richard Metteer

AGREEMENT FOR ADOPTION
OF
THE EARLY CHILDHOOD PREVENTIVE CURRICULUM MODEL

THIS AGREEMENT, made and entered into this _____ day of _____, 197_, by and between _____, hereinafter referred to as the ADOPTER, and THE SCHOOL BOARD OF DADE COUNTY, FLORIDA, hereinafter sometimes referred to as the DEVELOPER.

WHEREAS, THE SCHOOL BOARD OF DADE COUNTY, FLORIDA, under Title III, of the Elementary and Secondary Education Act, developed a program for the identification of high risk students and an early intervention program to prevent failure in first grade, and

WHEREAS, this program known as the Early Childhood Preventive Curriculum Program (ECPC) is now serving as a national demonstration model, and

WHEREAS, the ADOPTER wishes to adopt the ECPC program developed by the Dade County School System, and

WHEREAS, THE SCHOOL BOARD OF DADE COUNTY, FLORIDA, desires to be of assistance to the ADOPTER in implementing the Early Childhood Preventive Curriculum,

NOW, THEREFORE, BE IT RESOLVED THAT:

A. The DEVELOPER will -

1. Provide inservice training determined by the DEVELOPER to be appropriate for personnel of the ADOPTER school system to enable adoption of the ECPC Program by the ADOPTER school system.
2. Provide a sample set of Early Childhood Preventive Curriculum materials to the ADOPTER.
3. Provide support and monitoring activities at the ADOPTER site. (Cost to be assumed by ADOPTER and/or Facilitator)
4. Provide information to the ADOPTER regarding progress of adoption of model.

5. Provide follow-up report forms for completion by ADOPTER school district.

B. The ADOPTER and/or Facilitator will -

1. Support the adoption of the total model or partial model of the DEVELOPER model, as indicated on Exhibit A, attached hereto.
2. Reproduce sets of ECPC materials for local use.
3. Provide administrative personnel to support and assist adoption of the program.
4. Complete follow-up reports on the adoption process as requested by the Early Childhood Preventive Curriculum Demonstration Center project.
5. Pay costs of the following activities conducted pursuant to this agreement:
   a. all transportation costs
   b. per diem expenses to Dade County School Board employees in accordance with Florida Statue 112.061
   c. any costs incurred in printing ECPC materials other than the sample copy.

C. Work under this agreement will begin _____ and will be completed by June 30, 1976.

THE SCHOOL BOARD OF DADE COUNTY, FLORIDA

_____
E. L. WHIGHAM, SUPERINTENDENT OF SCHOOLS

_____
AUTHORIZED SIGNER for the ADOPTER School District

_____
POSITION

_____

_____

_____
FULL ADDRESS

EARLY CHILDHOOD PREVENTIVE CURRICULUM DEMONSTRATION CENTER

Dade County Public Schools
150 N. E. 19th Street
Miami, Florida 33132
(305) 350-3712

ADOPTION MODELS

Please check the category which is most appropriate for your school district and which your district will support.

☐ I. TOTAL ADOPTION _____ Number of Classes

1. Complete duplication of screening-selection process and identification of high risk population.
2. Creation of Early Childhood Preventive Curriculum class with student/teacher ratio at 20:1 with full-time teacher aide.
3. Implementation of assessment system with full use of diagnostic-prescriptive approach to instruction.
4. Establishment of a learning laboratory with learning centers and classroom organization and management procedures which facilitate individual and small group learning.
5. Use of specified commercial and project developed curricular materials.

☐ II. PARTIAL ADOPTION _____ Number of Classes

Adoption of the above with deletion of no more than 2 of the above components. e.g. omit screening procedures and create class of high risk by locally determined criteria, or vary class size, or use a volunteer instead of paid aide, or make changes or eliminate equipment and/or curricular materials, or use a part-time aide (half-day). Please indicate which of the above components are to be deleted or changed.

_____

_____

_____

_____

I-C-E SERVICES PROVIDED	SCHOOL/DISTRICT COMMITMENT
9. Modifications/Other considerations.	9. Modifications/Other considerations.

0. Specific/Approximate time schedules for adoption activities. _____

e attest that the entries above constitute the services to be provided by Project I-C-E nd the commitment to implement the I-C-E program by the above cited school/district.

For Project I-C-E	For School/District
Director	Superintendent/Principal
Date	Date

TATE FACILITATOR SECTION

n conjunction with the above agreement, the functions and obligations of the State acilitator are as herewith specified:

unctional Checklist:

eed Identification _____

rogram Planning _____

raining Arrangements _____

onitoring _____

inancial Support _____

valuation _____

APPROVED BY:

_____
(Facilitator)

_____
(State)

_____
(Date)

DEVELOPER/DEMONSTRATOR -- ADOPTER AGREEMENT

PROJECT I-C-E

1927 MAIN STREET

GREEN BAY, WI 54301

-AND-

_____
(School/District)

_____
(Street Address)

_____
(City, State, Zip)

Do mutually agree to such services, conditions and costs as herewith specified either with specific items as checked or modifications as noted, for the purpose of implementing the essential core* of the I-C-E Environmental Education Program in said school/district.

I-C-E SERVICES PROVIDED	SCHOOL/DISTRICT COMMITMENT
____1. Pre-adoption survey form to ascertain teacher interest in environmental education.	____1. Show through pre-adoption survey teacher interest in adopting/adapting an environmental education program.
____2. Training onsite and followup assistance via telephone/letter to designated local leadership team.	____2.* Designate a local leadership team of 3-5 persons to assist project staff with implementation, monitoring and evaluation.
____3. Instructional materials necessary for program implementation; available at cost.	____3.* Acquire necessary I-C-E instructional materials for teachers involved.
____4. Project staff for one day (5 hours) of teacher inservice to introduce I-C-E program and initiate implementation.	____4.* Schedule a block of 5 hours durin one day for inservice of staff to be in the program.
____5. Cognitive instruments to assess effectiveness of program for grades 2, 5, 8 and 11, forms for teacher assessment of episodes and activity models, and assist with development of local check-tests as needed.	____5.* Show that teachers in program agree to include a minimum of 6 concept episodes (mini-lessons or activities) directly or via adaption in their instructional program following implementation and during agreed monitoring period prior to evaluation.
____6. Spend one day, on site, 3-6 months following adoption, to monitor/evaluate program.	____6.* Provide for evaluation of program implementation and student impact via available instruments and/or through monitoring reports or teacher-made check tests on individual episodes.
____7. Instructional media and other resources, when desired, available at current fees.	____7. Inform and invite local, non-publ schools to participate, or visa versa.
____8. Bear the cost of transportation to/from adoption site as necessary.	____8. Bear expenses for lodging and meals of Project staff while on site, as necessary.

INSTITUTE FOR POLITICAL AND LEGAL EDUCATION

PRODUCER-CONSUMER AGREEMENT

197_ - 7_

Representing the Producer, the Institute for Political and Legal Education (IPLE), in conjunction with and under the authorization of the New Jersey State Department of Education, agrees to provide the following services for the staff of a consumer district:

1. Provide a five-day training workshop in methods and techniques necessary to replicate the program. (See pages 4-6 for copy of training schedule.)

   The training and consultant services of IPLE staff are provided to consumer districts free of charge through ESEA, Title III funding. (The cost of transportation and housing for IPLE to be borne by the State contracting for services.)

2. Provide the following materials at cost to the Consumer District:

   a. One complete set of newly professionally published curriculum guides and student leader manuals listed in the kit.
      1. Voter Education
      2. Government - The Decision-Making Process
      3. Individual Rights
      4. Fair Trail v. Free Press

   b. Filmstrip/cassettes produced by IPLE during 1975-76, if applicable
      1. "The New Voter Registration Laws"
      2. "County Government Bridging the Gap"
      3. "Age of Majority"
      4. Legal education - topic to be decided

   c. Supplemental teaching strategies and materials up-dating any IPLE material.

   d. IPLE Newsletter

   e. Recommendations of other curriculum material, simulations and related products that would be applicable as supplemental to prescribed units.

3. Provide the following materials at the cost of production (optional)

   a. Teacher training kit

b. *Newly developed legal education curriculum materials*
   1. Consumer Law
   2. Family Law
   3. Equality

c. Transparencies and other visuals

d. Multiple copies of student materials

4. Conduct three on-site visitations to state for the purpose of consultation and supplementary training.

To be eligible for the training and consultation services of IPLE, the staff of a consumer school district agrees to:

1. Provide adequate release time for staff, for workshops where necessary, and underwrite costs (if any) for such activity. (There is no charge, by IPLE staff, for any workshops or consultation services.)

   Travel and lodging expenses of IPLE staff must be borne by the state. IPLE staff prefers to train a minimum of twelve schools in states other than New Jersey.

2. Provide adequate release time for students in program for workshops, where necessary, and underwrite costs for such activity where feasible (e.g. bus transportation to workshops).

3. Provide adequate release time for students in program for field-study work (at least twice/month) in order to complete class related tasks (e.g. campaigning, interning with government officials, community research projects, etc.).

4. Purchase new IPLE instructional materials when appropriate at cost (optional - additional copies beyond the one set provided).

5. Teacher-Coordinators and school officials assure that the IPLE program will be presented in the format as recommended. Check appropriate lines and indicate anticipated date of implementation.

Voter Education

(a) Voter Registration ___
(b) Canvassing ___
(c) Campaigning ___
(d) Simulated Election ___
(e) Issue Analysis Center ___
(f) Election Information Center ___
(g) Campaign Registration Center ___
(5 out of 7)

Date: _____

Government: The Decision-Making Process

(a)	Local government study	___
(b)	County government study	___
(c)	State government study	___
(d)	Lobbying	___
(e)	Social research project	___
(f)	Community project	___
(g)	Simulations	___
(h)	Model Congress	___
	(5 out of 8)	Date: _____

Individual Rights: Speech-Fair Trial v. Free Press

(a)	Foundations of Law	___
(b)	Fair Trial v. Free Press	___
(c)	Free Speech	___
(d)	Case studies	___
(e)	Moot courts	___
(f)	Simulations (Tinker)	___
	(5 out of 6)	Date: _____

NOTE: A school does not have to adopt all three areas and full implementation may take place over a two year phase-in period.

6. Provide $200.00 stipend for teacher-coordinators (optional).

7. Complete questionnaires which will serve to identify those changes in the Consumer District schools as a result of the IPLE program.

8. Cooperate with the IPLE staff and the N. J. Department of Education by completing questionnaries which will identify the components of the program implemented, the number of teachers and students involved, and indicate the results of the implementation.

9. Allow for dialogue, for evaluative purposes, between participating district staff and IPLE personnel.

10. Assure that teacher-coordinators will attend scheduled workshops and events in order to meet and work with the other IPLE school districts.

11. Assure that teacher-coordinators will act as a resource to provide assistance to the new IPLE teacher-coordinator.

12. Permit resource persons to provide supplemental instruction in the classroom.

Additional information requested of consumer districts requesting training in the IPLE political education program. Please use additional pages if necessary.

WHAT ARE THE EDUCATIONAL NEEDS OR GOALS TO WHICH THE REPLICATION OF THE PROGRAM IS DIRECTED?

HOW WOULD YOU DESCRIBE THE LOCAL COMMUNITY IN WHICH THE STUDENTS WILL BE CONDUCTING FIELD WORK, ETC.? Please check one of the following and give a few descriptors of the community.

Urban

Suburban

Rural

Other

WHAT IS THE APPROXIMATE NUMBER OF STUDENTS IN SECONDARY SCHOOL CLASSES?

Persons to be trained by the IPLE Staff:

Names and responsibilities in the implementation of the program; indicate grade and class to be included.

Teacher(s):

_____

_____

_____

_____

Student(s):

_____

_____

_____

Administrator(s):

_____

_____

Out of state districts:

Please indicate other districts in your state that will make commitments to replicate the program:

Please indicate preferred site(s) and date(s) for training:

Signed:

I _____ of the _____
Name of Superintendent (please print) Name of School (please print)
have read the above Producer/Consumer agreements and understand the commitment level on both the part of IPLE and _____ (please print)
School District.

Consumer School District

_____
Address

_____

Telephone No. _____

_____
Superintendent

_____
Teacher-Coordinator

Producer Project

_____
Barry E. Lefkowitz, Director
Institute for Political and
Legal Education

_____
Executive Director
Educational Improvement
Center-South
Woodbury-Glassboro Road
P. O. Box 426
Pitman, New Jersey 08071
(609) 589-3410

Consumer districts in states other than New Jersey should coordinate orientation and/or training workshops with the dissemination activities of their ESEA, Title III Dissemination Facilitator or Coordinator. For that reason, one of these individuals should sign the agreement below to indicate his/her knowledge and support of the dissemination activity planned.

_____ Name _____
Signature
ESEA, Title III Dissemination Facilitator
or Coordinator

_____ Address _____
Position

_____

_____
Date

Phone _____

See pages 122-126 of What Every Potential Adopter Needs to Know

ESEA Title III, Section 306
Project: PEGASUS-PACE
Tuscaloosa City Board of Education
1100 - 21st Street East
Tuscaloosa, Alabama 35401

4 D/D + A

Commitment to Adopt

MEMORANDUM OF AGREEMENT BETWEEN PROJECT: PEGASUS-PACE, THE DEVELOPER-DEMONSTRATOR, AND AN ADOPTING SCHOOL SYSTEM

This agreement is made and entered into this _____ day of _____, 197___ by and between ESEA Title III, Project: PEGASUS-PACE, Tuscaloosa, Alabama (hereinafter referred to as the "Developer-Demonstrator") and the undersigned representatives of the _____ School District (hereinafter referred to as the "Adopter") in _____ City, _____ County, _____ State.

I. The Adopter agrees to the following:

A. To engage in a new survey of educational need (or to have established the need for PEGASUS-PACE through an ongoing needs assessment).

B. To involve the instructional personnel who will implement the adoption in the decision to adopt. (Participation of program adopters should be on a voluntary basis.)

C. To employ the PEGASUS-PACE Continuous Progress Reading Program as the total developmental reading program for the assigned students of program adopters, specifically,

1. Administering an informal reading inventory to determine students' initial entry reading levels;

2. Administering the PEGASUS-PACE Diagnostic Instruments for the appropriate instructional levels as indicated by the results of the informal reading inventories;

3. Recording on the Sub-grouping Chart as well as on the Objectives Skills Check Sheets the assessed needs of students as indicated by the diagnostic procedures;

4. Grouping and sub-grouping students according to diagnosed needs in reading skills instruction;

5. Developing and prescribing learning activities for each student appropriate to his diagnosed needs, and instructing students on this personalized basis;

6. Reporting to parents and students by means of a report card which is appropriate to the continuous progress concept and through parent-teacher conferences (holding at least two planned and scheduled parent conferences for each student during the year, if possible).

I. (Continued)

D. To demonstrate administrative commitment by the following actions:

1. Investment of adequate human, physical, and financial resources;

2. Provision of released time for staff development on a scheduled basis (for example: summer workshops, half-day work sessions, seminars, etc.);

3. Providing or securing funds for travel of Adopter personnel to the Developer-Demonstrator site for training and of Developer-Demonstrator personnel to the Adoption site for consultative help or training, etc.

4. Negotiating this memorandum of agreement with the Developer-Demonstrator;

5. Providing or securing standardized tests and resources for pre-post summative evaluation; maintaining documentation of adoption activities;

6. Following all relevant guidelines of ESEA, Title III.

E. To demonstrate commitment of instructional personnel by the following actions:

1. Participation of an adopter team (teachers, administrators, resource persons, etc.) in staff development sessions (2½ days or 5 half-day modules) at the Developer-Demonstrator site;

2. Participation of adopter leadership personnel in in-depth sessions for PEGASUS-PACE trainers at the Developer-Demonstrator site;

3. Participation of all implementers in adopter staff development functions on a scheduled basis;

4. Conducting (with administrative support) a pre-post summative evaluation of major learner-based product objectives;

5. Employing the PEGASUS-PACE Continuous Progress Reading Program as detailed in Section C, above; and documenting the implementation of the program;

6. Utilizing the PEGASUS-PACE Adoption Progress Report Form as a means of regularly reporting implementation progress, requesting feedback or assistance from the Developer-Demonstrator, etc.

F. To develop an evaluation plan and conduct evaluation in accordance with possible U. S. Office of Education stipulations which might be expressed through the State Facilitator or the Developer-Demonstrator. (For this purpose, a general evaluation model adaptable to the needs of PEGASUS-PACE adopters, will be available from the Developer-Demonstrator.)

G. To offer participation to non-profit non-public schools (required by OE); and to retain evidence of their intention to participate (letter of acceptance) or evidence of their declining the offer (letter of rejection).

H. To accept the Developer-Demonstrator's permission to reproduce the PEGASUS-PACE materials intact, as stipulated in Section II below, and to provide feedback relevant to subsequent refinement of teacher-use and learner-use materials.

II. Concerning the reproduction of PEGASUS-PACE copyrighted materials, the Developer-Demonstrator herewith grants permission to this Adopter as follows:

A. To reproduce intact, displaying all PEGASUS-PACE titles, labels, and copyright information, all materials in the Master Volume of the PEGASUS-PACE Continuous Progress Reading Materials. (It is understood that this permission is extended only for the non-profit use of the program with Adopter students and teachers. Sections will not be lifted out of context, "cut and pasted" elsewhere, etc.)

B. To reproduce intact, displaying all PEGASUS-PACE or Tuscaloosa City Schools labels, titles, and copyright information, all staff development materials produced by the Developer-Demonstrator. (It is understood that this permission is extended only for the non-profit use of the Adopter for staff development functions. Full reference and credit to PEGASUS-PACE should be given should any sections be quoted in subsequent publications, professional articles, presentations, etc.)

III. Contingent upon sufficient FY 76 funding by ESEA Title III, the Developer-Demonstrator agrees to the following:

A. To provide free at the Developer-Demonstrator site a competency-based training program for Adopter teams composed of teachers, resource persons, administrators, supervisors, facilitators, etc. This staff development activity for PEGASUS-PACE implementors generally will include five three-hour modules scheduled within a 2½ day time-span. (It is understood that the Developer-Demonstrator cannot provide funds for travel, food, and lodging, etc.)

B. To provide free, except for the cost of the PEGASUS-PACE Trainer's Kit, in-depth staff development at the Developer-Demonstrator site for State Facilitator staff members and Adopter leadership personnel who will serve as trainers of instructional personnel during the implementation of the adoption. (Again, it is understood that the Developer-Demonstrator cannot provide funds for travel, food, and lodging, etc.)

C. To provide follow-up technical assistance, including

1. Conferring by telephone when called (as often as needed);

2. Responding by mail to the Adopter's regular progress report, utilizing the PEGASUS-PACE Adoption Progress Report Form, and to other requests for assistance (as often as needed);

3. To provide free consultative help at the Adopter site upon several possible occasions, contingent upon the availability of sufficient Developer-Demonstrator personnel time and also upon the payment of travel and living expenses, etc., by the Adopter or State Facilitator. Possible occasions might include Adopter site workshops for PEGASUS-PACE implementors, an implementation Adopter site visit, and/or an operational site visit.

III. (Continued)

D. To make available for the Adopter's use the following items:

1. The Adoption Progress Report Form, which will be used as a means of continually assessing the degree to which all aspects of the PEGASUS-PACE adoption are successfully taking place (free -- can be reproduced by the Adopter);

2. A general evaluation model which is adaptable to the requirements (by USOE) of potential PEGASUS-PACE Adopters;

3. A Master Volume of the PEGASUS-PACE Continuous Progress Reading Materials (17 levels), loose-leaf bound in a hard-back vinyl binder. As many copies as needed by the Adopter may be ordered for $35.00 each, postage paid, from the

Tuscaloosa City Board of Education
Attention: Marie Sinclair, Director
Projects: PEGASUS-PACE and TRIAD
1100 - 21st Street, East
Tuscaloosa, Alabama 35401

4. A PEGASUS-PACE Trainer's Kit, including framed over-head transparencies, an audio cassette, a color coded list of objectives for all levels, various other printed materials, and an interaction analysis manual. These kits may be ordered for $50.00 each, postage paid, from the

Tuscaloosa City Board of Education
Attention: Matie Sinclair, Director
Projects: PEGASUS-PACE and TRIAD
1100 - 21st Street, East
Tuscaloosa, Alabama 35401

IV. It is mutually agreed:

A. That the signatures affixed to this memorandum signify acceptance of the conditions described herein. This acceptance allows this school district to become an official adopter of the validated PEGASUS-PACE program, specified in this document.

B. That upon acceptance by the undersigned Adopter and Developer-Demonstrator personnel, the period of this agreement will be from the first day after Developer-Demonstrator receipt of the FY76 Grant Award Document from ESEA Title III until the end of the ensuing budget year.

C. That the Adopter and the Developer-Demonstrator may by joint agreement modify any condition stated above insofar as the modification is consistent with ESEA Title III, Section 306, guidelines, the budgetary constraints and Project objectives of PEGASUS-PACE, and the policies of the Tuscaloosa City Board of Education.

D. That the failure of the Adopter to preserve the integrity of PEGASUS-PACE will jeopardize that school district's status as a PEGASUS-PACE Adopter.

In witness whereof, the parties have herewith set their hands the day and the year first above written.

By _____, Signature
LEA Superintendent of Schools;

By _____, Signature
LEA Adopter Principal;

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By _____, Signature
_____; LEA Adopter Position

By ESEA, Title III, Project: PEGASUS-PACE
Tuscaloosa City Schools

_____
Project Director

By ESEA, Title III, State Facilitator

_____
Facilitator Staff Member

CONNECTICUT FACILITATOR PROJECT

ADOPTION AGREEMENT

I. Adopter Section

School Name _____

As the person empowered to make major decisions in this school/district, I agree to commit our school/district to the trial adoption and initial installation of the

_____ as detailed in the Attachments herein.
Developer/Demonstration Project

_____ _____
Date Superintendent, Headmaster, Parochial School Principal

Other members of the decision making team:

_____

_____

_____

II. Developer-Demonstrator Section

Project Name _____

As project director for the aforementioned Developer/Demonstrator project, I hereby certify that the _____ school/district has met the particular criteria established by the project and I look forward to a successful adoption experience.

Date: _____ Project Director: _____

EDUCATIONAL RESOURCES CENTER - 800 Dixwell Avenue, New Haven, Connecticut 06511
Phone (203) 562 - 9967 - In Connecticut, Phone (800) 922 - 1567 Toll Free

a project of the Area Cooperative Educational Services (A.C.E.S.)

III. Facilitator Project Section

As director of the Connecticut Facilitator Project I certify that the

_____ school/district has met the criteria established by the CFP in applying for assistance. In addition to providing on-going technical assistance, the CFP agrees to commit up to $_____ to the aforementioned school/district to be distributed in the following manner (details contained in Attachments):

I. Travel Assistance $_____

II. Training $_____

III. Release Time $_____

IV. Materials $_____

TOTAL $_____

_____
Date

_____
Peter C. Young, Executive Director
Area Cooperative Educational Services

_____
Harry W. Osgood, Director
Connecticut Facilitator Project

NEW MEXICO
Education Services Consortium
STATE FACILITATOR, ESEA TITLE III, SECTION 306
HWY 85 NORTH, P.O. BOX 640, BERNALILLO, NEW MEXICO 87004 PHONE (505) 867-5905

STATEMENT OF INTENT

The New Mexico Education Services Consortium and Project ACTIVE staff intend to invest professional and financial resources into the adoption or piloting of the U.S.O.E. nationally validated education program titled Project ACTIVE.

Participants in the Project ACTIVE training program intend to perform the following activities during the 1975-76 school year:

1. Invest a minimum of three 30-minute instructional periods per week implementing one element of the Project ACTIVE curriculum.
2. Conduct at least one orientation program that will be presented within their district/agency to explain the program to other educators.
3. Inventory equipment which may be utilized in an adoption and submit a formal request to their district/agency for additional items needed.
4. Submit to the State Facilitator office a task calendar, the Field-Testing Implementation Form, pre-and post-test scores of students involved in the program and the Final Implementation Report.

Signature _____ Date _____
Participant

_____
District/Agency where employed

Signature _____
New Mexico Education Services Consortium

NEW YORK STATE FACILITATOR PROJECT
(NYSF)

ADOPTION AGREEMENT

I. Adopter Section

School Name _____

As the person empowered to make major decisions in this school/district, I agree to commit our school/district to the trial adoption and initial installation of the _____ (Developer-Demonstration Project) as detailed in the Attachments herein.

_____ Date

_____ Superintendent, Headmaster, Parochial School Principal

Other members of the decision making team:

_____

_____

_____

II. Developer-Demonstrator Section

Project Name _____

As project director for the aforementioned Developer-Demonstrator project, I hereby certify that the _____ School/District has met the particular criteria established by the project and I look forward to a successful adoption experience.

_____ Date

_____ Projector Director

III. NYSF Section

As project manager of the NEW YORK STATE FACILITATOR PROJECT, I certify that the _____ (School/District) has met the criteria established by the NYSF in applying for assistance. In addition to providing on-going technical assistance, the NYSF agrees to commit up to $_____ to the aforementioned school/district to be distributed in the following manner (details contained in Attachments):

I.	Travel Assistance	$_____
II.	Training	$_____
III.	Release Time	$_____
IV.	Materials	$_____
	TOTAL	$_____

_____
Date

_____
FRANK B. MESIAH, PROJECT DIRECTOR
NEW YORK STATE FACILITATOR PROJECT

Attachments:

WISCONSIN DISSEMINATION CENTER FOR INNOVATIVE PROGRAMS

ADOPTION AGREEMENT

School/District_____

Developer/Demonstrator Project_____

Date_____

Attachment A: Personnel Involved in the Adoption
Attachment B: Total Cost Estimate for Adoption
Attachment C: Developer/Demonstrator Contract
Attachment D: Termination of Contract

WISCONSIN DISSEMINATION CENTER FOR INNOVATIVE PROGRAMS

ADOPTION AGREEMENT

I. Adopter Section - School/District Name_____

As the chief administrative officer of this schol/district, I agree to commit our school/district to the adoption/adaption and initial installation of the _____(Developer/Demonstrator project) as detailed in the attachments herein.

_____ _____
(Date) (District/school administrator)

Other members of the decision-making team: _____

_____

_____

II. Developer/Demonstrator Section - Project Name_____

As project director for the aforementioned Developer/Demonstrator project, I hereby certify that the _____school/district has met the particular criteria established by the project in the attachments herein.

_____ _____
(Date) (Project Director)

III. Dissemination Center Section

As representatives of the Wisconsin Dissemination Center, we certify that the_____ school/district has met the criteria as established by the Center for the adoption of an innovative project and qualifies for Center assistance in such adoption. Said assistance will consist of those services and costs as detailed in the attachments herein.

_____ _____
(Date) Russell S. Way, Administrator
Title III, E.S.E.A.

_____
Bob Kellner, Director of Dissemination
Wisconsin Dissemination Center
for Innovative Programs

ATTACHEMENT "A"

PERSONNEL INVOLVED IN THE ADOPTION/ADAPTION

Please indicate the contact person who is coordinating the adoption/adaption in your school/district:

Person_____ Title_____Phone No._____District_____

These are the school personnel who will be involved in the adoption/adaption of the_____
(Developer/Demonstrator Project)

at the following site(s):

School Building Name(s)	Address	Principal	Phone No.	Grade Levels Involved	Number of Students	Number of Teachers

Teachers (Names). List or attach teacher roster.

ATTACHMENT "B"

TOTAL COST ESTIMATE FOR ADOPTION

Itemized costs for the Wisconsin Dissemination Center

1. (A) Travel (For Orientation and/or Training)

Dates for visitation to or from the D/D site are:
(Please indicate purpose of trip.)

_____

_____

List names and titles of visitors:

_____

_____

_____

Itemize travel cost:

Transportation	Specify	Total Cost
Common carrier (type)	_____	_____
Automobile-miles @ 14¢	_____	_____
Cab, Limousine		_____
Additional expenses		
Registration		_____
Special fees		_____
Parking		_____
Other (specify)		_____

SUB-TOTAL TRAVEL EXPENSES $_____

2. (A) Materials for Training

SUB-TOTAL TRAINING EXPENSES $_____

3. (A) Consultant fees (Training)

SUB-TOTAL CONSULTANT FEES $_____

TOTAL DISSEMINATION CENTER COST $_____

TOTAL COSTS ESTIMATE FOR ADOPTION

Itemized costs for adopting school/district

1. (A) Travel (For Orientation and/or Training)

Meals $_____
Lodging $_____

1. (B) Travel (For Monitoring, and/or Evaluation)

Dates for D/D personnel visitation to school site are:
(Please indicate purpose of trip.)

_____

_____

List names of project personnel:

_____

_____

_____

Itemize travel cost:

Transportation	Specify	Total Cost
Common carrier (type)	_____	_____
Automobile - miles @14¢	_____	_____
Cab, Limousine		_____
Lodging: number of nights	_____	_____
Meals		_____
Additional expenses		
Registration		_____
Special fees		_____
Parking		_____
Other (specify)		_____

SUB-TOTAL TRAVEL EXPENSES $_____

2. (B) Materials for Implementation

SUB-TOTAL MATERIALS COST $_____

3. (B) Consultant Fees for Follow-up
(Monitoring/Evaluation)

SUB-TOTAL CONSULTANT FEES $_____

4. Other Costs (e.g. costs of substitutes, inservice reimbursements, credit on salary schedule)

SUB TOTAL OTHER COSTS $_____

TOTAL ADOPTING SCHOOL/DISTRICT COSTS $_____

ATTACHMENT "D"

TERMINATION OF CONTRACT

1. All parties reserve the right to terminate the adoption contract on the basis of a mutual understanding.

2. Unless otherwise stipulated, six months after the adoption contract date--technical and financial assistance from the Dissemination Center to the adopting school will cease. Thereafter, the adoption/adaption becomes the mutual responsibility of the adopting school and the Developer/Demonstrator project.

Project Adventure

INITIAL LETTER OF UNDERSTANDING

(E.S.E.A., Title III - Section 306)

National Diffusion Network

SOME PRELIMINARY INFORMATION:

This Initial Letter of Understanding has been put together in order to gather together in one place some very specific information concerning your school system and its proposed affiliation with Project Adventure. The information requested is concerned with:

- Listing the names, addresses, phone numbers and position of the key participants
- Defining goals and objectives
- Describing training needs and ways to meet those needs
- Defining financial responsibility

We recognize the Project Adventure is a somewhat complex project with a number of components which can be inter-related or which can be broken apart. We want you to recognize that there is no one right way for a school system to inter-act with Project Adventure. What is important, however, is that we take the time to develop a workable accomplishable plan.

This initial Letter of Understanding will be supplemented by a much more detailed letter which will be developed as a product of the first phase of training. This Detailed Letter of Understanding will include such things as dates for program implementation, dates and description of follow-up contracts, plans for evaluation, arrangements for additional training, delegation of program and financial responsibility to teachers, administrators, state facilitators, Project staff and others (parents, students, consultants)

Naturally, we recognize that neither of these Letter of Understandings are legal, binding documents. At their best the letters should represent a carefully arrived at informational and planning statement; a statement which will serve as the basis for cooperation between the Project, the state facilitator and your school system.

Obviously, the ultimate success of this cooperative venture is dependent not only on formal (or at least semi-formal documents) but also on the good will, energy and level of commitment of all the persons involved.

We're pleased that you're interested in working with us. If you have any questions as you work through this Initial Letter of Understanding please feel free to get in touch with me, or with my colleague, Mary Smith.

Sincerely,

Robert R. Lentz
Director

RRL/kle

PROJECT ADVENTURE
775 Bay Road
Hamilton, Massachusetts 01936

INITIAL LETTER OF UNDERSTANDING

with

School District:_____

Address:_____

_____ ZIP CODE:_____

Superintendent:_____

Address:_____

_____ ZIP CODE:_____

Phone number:_____

Schools Involved:_____ _____

Address:_____ _____

_____ _____

Phone number:_____ _____

Grade level
of school:_____ _____

School Enrollment:_____ _____

Designated Contact
Person within each
School:_____ _____
(An important person who should probably be someone who is directly involved with the prog

Contact Person Within System:_____
Could be one of the building
contact persons or someone
else Address:_____

_____

Position:_____

Phone number:_____

(Please add additional pages if necessary)

Written Materials and Supplies _____

*Curriculum Support, for example:
Bus transportation, worksheets, food, substitutes _____

Outdoor Equipment _____

Ropes Course Building

actual materials and supplies _____
tools _____
consultant planning time _____
consultant building time _____
consultant follow-up _____

Other

Supplementary teacher training _____

Additional staff _____

Substitute cost _____

Released time for teachers _____

Evaluation costs _____

_____ _____

_____ _____

_____ _____

Superintendent's signature _____

Date _____

Facilitator's signature _____

Date _____

Director, Project Adventure _____

Date _____

Please comment on the reason why you anticipate that the proposed affiliation between Project Adventure and your school system will be a successful affiliation.

(Note: You might want to comment on the particular needs of your school or its community. You might want to comment on your system's willingness to support new and effective programs, or you might want to comment on the commitment level of the school's faculty. You may find these areas inappropriate, and choose to comment in other areas. Whatever the case, we are interested in your reasons for anticipated success.)

Form prepared by:_____

_____

Position:_____

Superintendent's signature:_____

Date:_____

School System_____

School_____

PART II

SAMPLE FINANCIAL AGREEMENT

This section will serve to clarify much of the specific financial responsibility to be assumed by the Project, the local School System and the Facilitator in the adoption of Project Adventure. The items listed below are relevant to an on-going affiliation with the Project. Some, or occasionally all may be involved in each specific adoption. Starred items are considered essential components, others may be needed depending on the particular needs, plans and objectives of the school system.

ITEM	COST TO BE ASSUMED BY
*Training (at least one option is essential)	
A. Accredited summer workshops at Boston University site	
Tuition or workshop fees/room & board	_____
Transportation	_____
Number to be trained ( )	
B. Three or five day workshops at Project Adventure	
Room, board and incidentials for participants	_____
Transportation of participants	_____
Number to be trained ( )	
C. Three or five day workshop at local school system	
Room, board and expenses for Project staff	1st trainer - Project Adventure
Transportation for Project staff	1st trainer - Project Adventure
Number to be trained ( )	

School System_____

School_____

1. What educational gains do you anticipate obtaining through an affiliation with Project Adventure?

2. What type of training will be most appropriate?

   a. Academic Curriculum Development Workshop 5 day_____ 3 day_____

      Preferable location Project site_____ Local site____

      Preferable date or time of year _____

      Anticipated number of participants _____

   b. Physical Education/Outdoor skill Workshop 5 day_____ 3 day_____

      Preferable location Project site_____ Local site____

      Preferable date or time of year _____

      Anticipated number of participants _____

   c. Specific skill or subject area workshop

      Describe topic(s) area _____

      _____

      _____

      Length of time _____

      Preferable location Project Site_____ Local site____

      Preferable date or time of year _____

      Anticipated number of participants_____

School System_____

School_____

1. What educational gains do you anticipate obtaining through an affiliation with Project Adventure?

2. What type of training will be most appropriate?

   a. Academic Curriculum Development Workshop 5 day_____ 3 day_____

      Preferable location Project site_____ Local site____

      Preferable date or time of year _____

      Anticipated number of participants _____

   b. Physical Education/Outdoor skill Workshop 5 day_____ 3 day_____

      Preferable location Project site_____ Local site____

      Preferable date or time of year _____

      Anticipated number of participants _____

   c. Specific skill or subject area workshop

      Describe topic(s) area _____

      _____

      _____

      Length of time _____

      Preferable location Project Site_____ Local site____

      Preferable date or time of year _____

      Anticipated number of participants_____

INFORMATION AND APPLICATION TO THE HAWAII STATE DEPARTMENT OF EDUCATION
FOR INSTALLATION OF THE HAWAII ENGLISH PROGRAM (ELEMENTARY)

This form, completed is to accompany any official request for the purchase and installation of the Hawaii English Program. The information called for is to be furnished by the requesting agency after it has completed, to its full satisfaction, the necessary investigation of installation details and arrived at a decision to implement the program.

Information provided should be as complete as possible so that the Hawaii State Department of Education can reach an early decision to accept or deny the request. To have a request considered for any given school year, both the completed form and an official letter of request must be received at the following address no later than ten months* preceding the September date of a new school year for which installation is planned:

Superintendent
Hawaii State Department of Education
P. O. Box 2360
Honolulu, Hawaii 96804

Telephone: 548-6405

* This requirement may be waived, if all other considerations can be met.

REQUESTING AGENCY

1. Name of requesting agency _____

Address _____
No. Street City State ZIP

Mailing address if different from above _____

_____ Telephone _____
Area Code No.

District, department, university or other jurisdiction to which the agency belongs _____
(If private or parochial school, please indicate)

Grade levels of school (K-6, K-8, etc.) _____

2. Has the request been authorized? _____

If so, by whom? _____
Name Position

Mailing address _____
No. Street City State ZIP

Telephone _____

3. Who will coordinate the installation; that is, who will be the contact person for all installation planning?

Name _____ Position _____

Address _____ Telephone _____

4. Name of person completing this form: _____

Position _____

Address _____ Telephone _____

INSTALLATION INFORMATION

1. What is the intended date of HEP installation? _____

2. The HEP K-6 may be purchased in various incremental installation packages. Indicate:

Total K-6 (Skills, Language Systems, Literature) _____

K-3 (Skills and Literature) _____

Primary Grades (HEP/MRE) _____

3. On the attached schedule describe your projected plans for completing the installation.

4. How good are your prospects that your installation plans be followed through to completion?

Assured _____ Good _____ Fair _____ Uncertain _____

Comments _____

5. What percent of the total number of classes per grade level do the installation classes represent? (100%? 50%? 25%?)

6. How will the installation classes be organized?

		No. of Teachers	No. of Aids	No. of Pupils
_____	Departmentalized	_____	_____	_____
_____	Self-contained	_____	_____	_____
_____	Teamed	_____	_____	_____
_____	Learning Center	_____	_____	_____

Other (Explain) _____

_____

7. If the materials are to be used by more than one class, how will the sharing be done?_____

_____

How many students will share the same set of materials?_____

8. What grade level or grade level combination(s) do you propose to begin with?

(K, K-1 K-2)_____

9. Indicate your grouping: _____heterogeneous
_____homogeneous
_____Other

10. Will there be mildly handicapped children in the installation classes?_____
Check the types:

_____MRE
_____LD
_____Disadvantaged
_____Other(describe)_____

If special components of HEP are available for mildly handicapped children, would you be interested in obtaining them?_____

TEACHER AND ADMINISTRATOR ORIENTATION AND TRAINING

. Were teachers given the option of participating or not participating in the installation? Yes_____ No_____

. Have your teachers committed themselves to the basic training required as a condition of use of the HEP? Yes_____ No _____

. If there are teachers who will not be able to undergo the training prior to implementation, are you making provisions for on-site training? Yes_____ No_____

. What dates are best for your training program?_____

. Are you contemplating arranging for college credits or inservice credits for teachers taking the training? Yes_____ No _____

If college credits, with what college and how many credits for how many hours?

_____

If inservice credits, what institution and how many credits for how many hours?

_____

. How will the training be financed?_____

. Will provisions be made for consultant services from the HEP staff or other project staffs? Yes_____ No _____

. Will arrangements be made for the orientation of administrators who will be involved in key ways in the installation? Yes_____ No_____

MONITORING, SUPERVISION, COORDINATION

1. What arrangements will be made for supervising, monitoring, servicing and coordinating the installation? Explain the organization, the existing or additional staff to be involved and their functions.

EVALUATION

Do you have plans to evaluate the HEP?

APPROXIMATE PLANS FOR INSTALLATION
OF K-6 HEP ELEMENTARY PACKAGE

Year	Grade Level(s) to be Installed	No. of Classes	No. of New Pupils	No. of Experienced Pupils to Next Level	Total No. of Pupils	Total No. Teachers

APPLICATION TO BECOME AN ADOPTION SITE

This form should be returned to: FOCUS DISSEMINATION PROJECT
McCarron's Lake School
211 North McCarron's Boulevard
St. Paul, Minnesota 55113

We would like to apply to become a Focus Adoption Site. In applying for the services offered by the Focus Developer/Demonstration Site, we agree to comply with the following criteria.

Please check each statement you can agree with:

_____ We agree to conduct a Needs Assessment to identify the group of students whose needs are not being met. (Training will be given on how to assemble a Needs Assessment as part of the Inservice Training.)

_____ We agree to use the mini-school concept.

_____ We agree to include a group process.

_____ We agree to have voluntary admission into our program (Focus). Students will not be forced to enter the program.

_____ We agree that the school district has committed itself to implementation of the Focus Model.

_____ We agree to provide an Evaluation Model and the results of Evaluation to The Focus Dissemination Project.

Tentative implementation date of the Focus Model is _____

Dates that your Focus Staff could participate in the Inservice Training program. This inservice lasts from Monday evening until Saturday noon, and includes internship in the program during the day and evening seminars.

Suggested dates: _____

_____ Signature

_____ School and District

_____ Date

_____

_____ Phone Number

_____ Address

The application will be screened along with others received to determine who will be inserviced as an Adoption Site.

11/22/74

APPLICATION FOR FINANCIAL ASSISTANCE FROM THE
FACILITATOR PROJECT FOR ADOPTION OR STUDY OF A PROGRAM
APPROVED FOR NATIONAL DISSEMINATION

(This section to be filled in by the Facilitator Project)

Amount Requested_____ Date Request was Received at Facilitator Project_____

Amount Approved_____

Name of EIC Staff Assisting District_____ Date District was Informed of Decision _____

SCHOOL DISTRICT OR AGENCY SEEKING FINANCIAL ASSISTANCE SHOULD PROVIDE THE FOLLOWING INFORMATION:

1. Name of school district or agency:_____

   Address:_____

   _____

   Phone Number:_____ County:_____

2. Name of contact person for this application:_____

   Title:_____

   Address:_____

   Phone Number:_____

3. Name of project to be adopted:_____

   _____

4. Name(s) of school(s) and grade level(s) to be involved in adoption:

   a._____

   b._____

   c._____

   d._____

   Total number of schools involved:_____

5. Number and position(s) of staff to be trained at each school adopting project:

a. _____

b. _____

c. _____

d. _____

Total number of staff to be trained: _____

6. Number of students to be involved at each school adopting project:

a. _____ b. _____ c. _____ d. _____

Total number of students involved in adoption: _____

7. What are the educational needs of the district which will be addressed by the program to be adopted?

_____

_____

_____

_____

_____

8. How were these needs identified? _____

_____

_____

_____

_____

9. Why is the district requesting financial assistance to adopt this program?

_____

_____

_____

_____

_____

10. Is district in an urban aid city? YES_____ NO_____

11. Total number of schools in district: _____

12. EIC region of district: _____ Northwest

_____ Northeast

_____ Central

_____ South

13. Is applicant a non-public school? YES_____ NO_____

14. What percent of the children to be involved in the project are classified as special education students? _____

15. Is application for adoption of a special education project? YES_____ NO_____

16. Is application for adoption of an early childhood project? YES_____ NO_____

17. Is a current adoption of this program operating in the district? YES_____ NO_____

If Yes, describe location and scope of that adoption: _____

_____

_____

18. Has district previously received financial assistance from the Facilitator Project for adoption of a project? YES_____ NO_____

If Yes, for which project? _____

How much financial assistance was given? _____

10. Is district in an urban aid city? YES_____ NO_____

11. Total number of schools in district: _____

12. EIC region of district:
_____ Northwest
_____ Northeast
_____ Central
_____ South

13. Is applicant a non-public school? YES_____ NO_____

14. What percent of the children to be involved in the project are classified as special education students? _____

15. Is application for adoption of a special education project? YES_____ NO_____

16. Is application for adoption of an early childhood project? YES_____ NO_____

17. Is a current adoption of this program operating in the district? YES_____ NO_____

If Yes, describe location and scope of that adoption: _____

_____

_____

18. Has district previously received financial assistance from the Facilitator Project for adoption of a project? YES_____ NO_____

If Yes, for which project? _____

How much financial assistance was given? _____

DEMONSTRATION SITE COMMITTMENT

NER THIS PAGE FOR OUT-OF-STATE PROJECTS ONLY:

Will district accept the responsibility of being a project demonstration site?

YES_____ NO_____

If Yes, please check which of the following aspects would be supported:

_____ 1. District would welcome small groups of five or fewer visitors into the school on a weekly basis.

_____ 2. District would welcome small groups of five or fewer visitors into the school on a monthly basis.

_____ 3. District would make available a staff member familiar with the project to guide visitors to the classrooms replicating the projects, and answer any questions the visitors might have.

4. Because educators benefit from seeing the classroom layouts, materials, and resource centers where students actually work at a replication site, we find it helpful to conduct training workshops within schools using the project. Such training sessions can be held after school, during vacations, or on Saturdays. The producer project or a turn-key trainer would conduct these workshops. There would be no costs to your district other than providing training space. Would you allow staff from other schools interested in the project to be trained in your building?

_____ District would allow training workshops to be held in our building should other schools desire to replicate the project. Our approval of this aspect of being a demonstration site gives the administration at the demonstration site all final decisions as to the dates of such workshops and the number of people invited to undergo this training.

_____ 5. District would make room space available for visitors to meet with the classroom teachers involved in the replication or the school staff member acting as a guide. This could be done during a teacher's free period or after school.

Comments:_____

_____

_____

_____

_____

_____

PROPOSED BUDGET FOR ADOPTION

FUNDS FROM LEA	Category	FUNDS FROM FACILITATOR PROJECT
$	Substitute Fees	$
$	Travel In-State	$
$	Travel Out-of-State	$
$	Curriculum Materials	$
$	Other Materials	$
$	Printing	$
$	Consultants	$
$	Equipment Rental	$
$	Evaluation Materials	$
$	Computer Time	$
$	Stipends	
	Other (please specify below):	
$		
$		
$		
$		
$	TOTALS	$
FUNDS FROM LEA		FUNDS FROM FACILITATOR PROJECT

On the next page, provide line item information on how funds in each category will be spent, separating LEA funds from Facilitator Project funds.

BUDGET EXPLANATION

FUNDS FROM LEA:

FUNDS FROM FACILITATOR PROJECT:

COMMENTS

ADDITIONAL COMMENTS OF APPLICANT:

Name and Signature of Applicant

ADDITIONAL COMMENTS OF EIC STAFF ASSISTING DISTRICT:

Name and Signature of EIC Staff

IMPLEMENTATION PLAN

Who was involved in reviewing programs for possible adoption?_____

Who was involved in the decision to adopt this particular program? What was the process for that decision? _____

What criteria were used for selecting particular teachers to be trained? _____

When would proposed training take place? _____

Will the same teachers attend all training sessions? _____

When would classroom implementation begin? _____

CONTINUED ---

How much time per day or per week would be devoted to use of the program? _____

_____

_____

Name and position of district professional staff designated as coordinator of the program

_____

_____

What types of activities are planned to monitor program implementation and provide feedback where needed? _____

_____

_____

_____

_____

_____

Is this adoption considered a single complete activity or a first step in a probable series of adoption activities? If the later, what might those activities include?

_____

_____

_____

_____

_____

DISTRICT LEVEL TURN-KEY TRAINER

NSWER THIS PAGE IF APPLYING FOR TRAINING OF TURN-KEY TRAINER FOR DISTRICT WITH TWENTY OR MORE SCHOOLS:

istricts with twenty (20) or more schools may apply for financial assistance to nderwrite the expense of establishing a district professional as turn-key trainer for he district for a particular project. This will enable the district to extend the doption of the project to many schools without placing an undue burden on the EIC turn-ey trainer.

1. Name and position of district person(s) to be trained as turn-key trainer(s):

_____

_____

_____

_____

2. Skills which would qualify district person(s) as trainer(s) for this project:

_____

_____

_____

_____

3. Number of schools to be involved the first year: _____

Number of schools to be involved the second year: _____

Number of teachers to be involved the first year: _____

Number of teachers to be involved the second year: _____

Number of students to be involved the first year: _____

Number of students to be involved the second year: _____

4. Time span over which activities will be conducted: _____

_____

CONTINUED ---

5. What financial costs of extending the adoption in the district are anticipated but not included in the budget of this application?

_____

_____

_____

_____

6. How does the district anticipate meeting these expenses? _____

_____

_____

_____

_____

ADENDUM TO FINANCIAL ASSISTANCE FORM
(to be filled out by Facilitator Project)

A. District Factor Group of District:

_____ A	_____ F	_____ V
_____ B	_____ G	_____ Z
_____ C	_____ H	
_____ D	_____ I	
_____ E	_____ J	

B. Community Type:

_____ Urban Center

_____ Urban-Suburban

_____ Urban Center-Rural

_____ Suburban

_____ Suburban-Rural

_____ Rural

_____ Rural Center

_____ Rural Center-Rural

SUBMIT ONE COPY

FORM-01

OKLAHOMA FACILITATOR CENTER
APPLICATION FOR ASSISTANCE

PART ONE: BACKGROUND INFORMATION

1. APPLICANT NAME

School Corp. or Non-Public School

Street Address - P. O. Box Number

City County

State Zip Code

2. CHIEF SCHOOL OFFICER

Name

Title

Street Address - P. O. Box Number

City County

State Zip Code

Area Code Telephone Number

3. DATE OF APPLICATION:

4. AREA OF NEED:

5. POPULATION DIRECTLY BENEFITING FROM ASSISTANCE (include grades):

6. NAME OF PROGRAM TO BE MATCHED:

7. LOCATION OF PROGRAM TO BE MATCHED:

8. CONTACT PERSON:

Name

Title

Street Address-P. O. Box Number

City County

State Zip Code

Area Code Telephone Numbe

9. I certify that the information contained in this document is true and correct to the best of my knowledge and belief.

Typed Name Title

Signature of Chief School Officer

(OVER)

PART TWO: CONTEXT MATCH

NEEDS ASSESSMENT NARRATIVE

1. Briefly (2 or 3 sentences) state why you believe the program you wish to visit matches a priority need of your school or school system.

GENERAL INSTRUCTIONS

1. One copy of Form 01 should be submitted to:

JESS BUTLER, State Facilitator
Title III, Statewide Facilitator Project
Edmond Public Schools
1216 South Rankin
Edmond, OK 73034

Phone: (405) 341-2246

OKLAHOMA FACILITATOR CENTER

APPLICATION FOR ASSISTANCE: TRAVEL INSTRUCTIONS: FORM 02

PART ONE: BACKGROUND INFORMATION

1. Item 1. Persons Visiting Developer Site. The persons listed should be those for whom travel assistance is being requested.

2. Out-Of-State Travel Assistance will ordinarily be approved for no more than two (2) persons.

3. The maximum to be spent on each school for travel will not exceed $1,000.00

4. Item 2. Additional persons may be sent at the Local Schools expense, provided that the Developer Demonstrator Project approves.

5. It is suggested that both a teacher and an administrator participate in visits to curricular Developer Demonstrator Projects.

6. The "Rationale for Making Visit" should briefly indicate why the particular person was selected.

7. Item 3 indicates the preferred visitation dates.

8. Item 5. If transportation is by automobile, mileage will be paid at the rate of 12¢ per mile for one round trip for one automobile figured for shortest map distance.

9. Item 7. Transportation and lodging will be reimbursed in amounts not to exceed those stated in the Cost Summary and only for the persons designated on Form OFC-02. Except for travel by automobile, RECEIPTS WILL BE REQUIRED FOR REIMBURSEMENT.

10. If the Developer Project charges a fee for visitors, the OKlahoma Facilitator Center (OFC) will pay the fee for the persons for whom the OFC is providing travel reimbursement.

GENERAL INSTRUCTIONS

1. Submit OFC Form-02, along with OFC Form-01 to:

JESS BUTLER, SF
Title III Statewide Facilitator Project
Edmond Public Schools
1216 South Rankin
Edmond, OK 73034

(COMPLETE REVERSE SIDE)

PART TWO: TRAVEL INFORMATION

School Corp. or Non-Public School _____ Street Address _____ P.O. Box Number _____

City _____ County _____ State _____ Zip Code _____

1. PERSONS VISITING DEVELOPER SITE

NAME/TITLE	RATIONALE FOR MAKING VISIT

2. Number of additional visitors for whom LEA will pay expenses _____

3. Leave From: _____ Date _____

   Arrive At: _____ Date _____

   Return To: _____ Date _____

4. ALTERNATE DATES FOR VISIT:

   First Alternate Leave: _____ Return: _____

   Second Alternate Leave: _____ Return: _____

5. MODE OF TRANSPORTATION: (Check One)

   ☐ Airplane ☐ Bus ☐ Automobile ☐ Train ☐ Other-Specify _____

6. NUMBER OF DAYS FROM DEPARTURE TO RETURN _____.

   Number of Days En Route: _____. Number of Days on Site: _____.

7. COST SUMMARY: Estimated expenses to Developer Demonstrator Project

   Transportation _____
   Lodging _____
   Meals _____

INSTRUCTIONS: FORM FFC-05 - APPLICATION FOR ASSISTANCE: INSTALLATION PLAN

Form FFC-05 is the blueprint the LEA will follow in adopting a selected D/D program; therefore, the LEA will need to confer with the FFC director and the D/D director while developing the Installation Plan. The completed Installation Plan will spell out (1) the steps the LEA will take in adopting (or adapting) the D/D program, (2) the budget and materials needed for the Installation, (3) the funding sources, and (4) the obligations accepted by the D/D and the FFC in regard to installing the program and evaluating its effectiveness. For this reason, the Plan must have the approval of both the D/D and the FFC before the LEA proceeds with its implementation. The FFC will notify the LEA of such approval on Form FFC-06, Approval (Denial) of Installation Plan.

PART ONE: BACKGROUND INFORMATION

The information required in Part One is identical with Part One of Forms FFC-01 and FFC-02, except Item 3 - Date of Application - which should be the date on which Form FFC-05 is completed.

PART TWO: INSTALLATION ASSISTANCE REQUEST

1. List only the schools in which the programs will be installed. Please give all the information requested for each school listed.

2. The School Contact Person should be someone who will ordinarily be at the school and who will be fully knowledgeable about the local installation.

B. Adoption Site Data

1. A separate page 3, Form FFC-05, should be completed for each school which will adopt (or adapt) the D/D program. Please photocopy or ask the FFC for as many extra copies of page 3 as are needed.

2. Item 5, page 4, Narrative Description of Adoption Stategy, will probably require additional space; attach as many extra pages as are needed. Number the added pages 4a, 4b, 4c, etc. The major steps described in Item 5, page 4 should include the following:

   Pre-installation training
   Program installation (program start-up)
   On-going training
   Monitoring (quality control)
   Impact assessment (evaluation plan)
   Continuation/Phaseout plans

   Other steps, as necessitated by local conditions or D/D program constraints, may be added.

3. Item 6, page 4. Since a copy of the Inservice Master Plan for the Installation is to be attached, the responses to Items 6A and 6B should be brief descriptions of the training that is anticipated. The number of persons to be trained, the time required, and the source and amount of resources needed should be specified.

4. Item 7, page 5, is the proposed budget for the Installation.
   4.1 Budget Items 1 through 3 are categories for which the FFC will not provide assistance.
   4.2 Budget Items 4 through 8 are categories for which the FFC may provide assistance; the specific dollar amounts and the kinds of assistance provided for a particular installation must be negotiated with the FFC.
   4.3 The FFC will not provide assistance for the purchase or rental of facilities or equipment, for remodeling costs, or for maintenance costs of facilities or equipment.
   4.4 Number any pages added for justification or explanation of budget items, as follows: 5a, 5b, 5c, etc.

C. Letter of Commitment

The Letter of Commitment must be completely filled out and must be signed by both the Chief School Officer and the School Board Chairman (or President).

Submit one copy

FLORIDA FACILITATOR CENTER
APPLICATION FOR ADOPTER ASSISTANCE
Installation Plans

FFC-05
9/74

PART ONE: BACKGROUND INFORMATION

1. APPLICANT NAME

School District or Non-Public School

Street Address - P. O. Box

City County

State Zip Code

2. CHIEF SCHOOL OFFICER

Name

Title

Street Address - P. O. Box

City County

State Zip Code

Area Code Telephone

3. DATE OF APPLICATION:

4. AREA OF NEED:

5. POPULATION DIRECTLY BENEFITING FROM ASSISTANCE (include grades):

6. NAME OF PROGRAM TO BE ADOPTED:

7. LOCATION OF PROGRAM TO BE ADOPTED:

8. CONTACT PERSON:

Name TITLE

Street Address - P. O. Box CITY COUNTY

State Zip Code AREA CODE TELEPHONE

9. *I certify that the information contained in this document is true and correct to the best of my knowledge and belief.*

Typed Name Title

Signature of Chief School Officer

FFC-05 Page 2

PART TWO: INSTALLATION ASSISTANCE REQUEST

A. School Adoption Sites

SCHOOL	ADDRESS	PHONE		PRINCIPAL	SCHOOL CONTACT PERSON
		AREA CODE	NUMBER		

B. ADOPTION SITE DATA

1. SCHOOL: _____

2. ADOPTING GRADE(S): _____

3. PERSONNEL INVOLVED IN ADOPTION:

A. Professional

Name	Grade or Subject

B. Non-Professional

Name	Grade or Subject

4. MATERIALS REQUIRED BY PROGRAM

Currently Available to LEA	Needed by LEA

5. NARRATIVE DESCRIPTION OF ADOPTION STRATEGY: (Directions: Describe in chronological order the major steps taken in installing, operating, and evaluating the program.) Attach additional sheets as necessary.

6. TRAINING (Attach copy of Inservice Master Plan Component.)

A. Pre-installation Training Needed:

B. Inservice Training Needed:

PROJECT BUDGET DETAILS*

7.

STATE ACCOUNT NUMBERS	ITEM NUMBERS	ITEMS	LOCAL OR OTHER BUDGET FUNDS	FACILITATOR CENTER FUNDS	TOTAL
100	1	Salaries			
220	2	Matching Social Security			
210	3	Matching Retirement			
510	4	Instructional Materials and Supplies			
310	5	Professional Services - Consultants (Specify)			
330	6	Travel			
340	7	Printing, Binding and Reproduction of Materials			
620	8	Audio Visual Materials (Non-Consumable)			
		TOTAL FOR PROJECT			

*Attach additional sheets if more space is needed for budget justification or detail

SF

C. SAMPLE LETTER OF COMMITMENT

Florida Facilitator Center
P. O. Drawer 190
Chipley, Florida 32428

Dear Sirs:

The _____ (L.E.A. or Non-Public School) and _____ (Chief School Officer) hereby agree to adopt the _____ (D-D Project Name) in _____ (School or Schools) according to the plan outlined in Section B-5, "Narrative Description of Adoption Strategy," of this application.

Furthermore, _____ (L.E.A. or Non-Public School) agrees to conduct an impact assessment of the adopted program in order to evaluate the effectiveness of the program, and to make the results of the impact assessment available to the Developer-Demonstration Center, the United States Office of Education, the Florida Department of Education, the Florida Facilitator Center, and any other group or agency required by law.

We understand that the adoption site(s) will be monitored by the staff of the Florida Facilitator Center.

Sincerely,

_____
Signature of Chief School Officer

_____
Signature of School Board Chairman

FFC-05
9/74 SF

FLORIDA FACILITATOR CENTER
APPROVAL (DENIAL) OF INSTALLATION PLAN

1. APPLICANT NAME School System or Non-Public School Street Address - P.O. Box City County State Zip Code	2. DATE OF APPLICATION 3. PROGRAM TO BE ADOPTED 4. LOCATION OF PROGRAM

5. ACTION TAKEN

☐ Installation Plan rejected. See accompanying letter for reasons.

☐ Installation Plan approved as submitted.

☐ Installation Plan approved with modification. For required modifications see FFC-05, page(s)_____

6. I hereby certify that the action noted above in regard to the accompanying Applicat for Assistance: Installation Plan (Form FFC-05) constitutes a binding agreement f the services and support specified in the Installation Plan as approved and/or modi between and among the school system or non-public school (named in Item 1), the Developer Demonstration Center (named in Items 3 and 4), and the Florida Facilitato Center.

_____ _____
Date Director, Florida Facilitator Center

_____ _____
Date Director, Developer Demonstration Project

LEA Chief School Officer: If your Installation Plan has been APPROVED and is acceptable to you as approved, please sign and mail this receipt to:

Florida Facilitator Center
P.A.E.C.
P.O. Drawer 190
Chipley, Florida 32428

The _____ has received its Approval of
(LEA or Non-Public School Name)
Installation Plan and will begin its replication or adaptation of _____
(Name of D/D Program)
on or after _____.
(Date)

_____ _____
Date Signature of the Chief School Officer

Part III Adoption Monitoring

Focus Dissemination Project (DD)

ECOS Training Institute (DD)

Project Health and Optimum Physical Education (DD)

Project I-C-E (DD)

Individualized Language Arts Diagnosis, Prescription, Evaluation (DD)

Project Success (DD)

Pegasus - Pace (DD)

Dale Avenue Project (DD)

Project Active (DD)

Diagnostic Prescriptive Arithmetic (DD)

FOCUS DISSEMINATION PROJECT
Adoption Validation

1. (a) Senior High School _____ Junior High School _____

   (b) Grade levels being served: 7 - 8 - 9 - 10 - 11 - 12 (circle appropriate level)

   (c) Public _____ Private _____

   (d) This school did not implement the Focus model following training _____
   (turn to summary portion for explanation)

2. (a) Total school population _____

   (b) Number of students being served by Focus _____

   (c) Number of minority students _____

3. Does this program include the following basic components:

   (a) A group process _____ Meets how often _____

   (b) A school within a school concept _____

   Describe:

   (c) Community support _____

   (d) Administrative support _____

4. (a) An evaluation process _____

   (b) When will initial evaluation data be available? _____

5. Staff involvement in Focus:

Name	Curriculum Area	Hours

6. How is program being funded?

7. This adoption appears:

_____ strong _____ fairly strong _____somewhat weak _____wea

Explain:

8. Is this adoption ready for visitors?

Yes _____ No _____ (if not, why not?)

9. Does this adoption site have the potential to become a training site for the Focus model?

Yes _____ No _____

SUMMARY: (Describe program strengths and weaknesses -- survival chances -- adopti or adaption of our model. Appears to be successful or not successful with students and why)

ECOS TRAINING INSTITUTE

FOLLOW-UP REPORT TRAINING FORM

SCHOOL DISTRICT and LOCATION: _____

NO. of TRAINEES CONTACTED: _____ DATE of FOLLOW-UP: _____

NO. ORIGINALLY TRAINED: _____

DATE OF ORIGINAL TRAINING: _____

OUTCOMES EXPECTED AT ADOPTER SITE	EVIDENCE OBSERVED DOCUMENTING PROGRESS MADE AT ADOPTER SITE	QUALITY of PROGRESS 1	2	3	4	COMMENTS OR RECOMMENTATIONS FOR ECOS STAFF ACTIONS
Pilot Time Lines						
Community School Linkage						
Awareness Presentations within LEA's						
Community Resources Identified						
Materials for Classroom use assembled						
Curriculum Guide						
Philosophy						
Goals						
Specific Aims						
Basic Content						

1 = No action required
2 = Needs some assistance, as suggested, in Comments
3 = Needs considerable help to bring up to desired level--requires follow-up action
4 = Totally absent or practically useless

Staff Member _____

(Over)

ENVIRONMENTAL CATEGORIES (specify)	NO. of ACTIVITIES per category	NO. OF ACTIVITIES which are community related	QUALITY of PROGRESS 1	2	3	4	
1.							
2.							
3.							
4.							
5.							
6.							
7.							
TOTAL _____	_____	_____					

COMMENTS:

PHYSICAL EDUCATION PROGRAM
MONITORING SHEET

To: Martha F. Owens

From: Susan B. Rockett

This material may be ... proper credit ... Optimum ...

SUBJECT: Monitoring of Project Hope Demonstration School

Grade _____

Date _____
Time _____
Teachers _____

1. Approved lesson plans designed in Project Hope are implemented. YES NO

   Lesson plan number _____
   Dates used _____
   A new lesson plan YES NO

   Policy being used YES NO

   COMMENTS:

2. Lesson plans being implemented have been approved YES NO

   If not, why not?

3. Lessons have been evaluated by the teacher YES NO

   A full evaluation report has been turned in to the program director. YES NO

   COMMENTS:

4. The AAHPER Youth Fitness Test and the Washington State Fitness Test will be utilized as an evaluation instrument. YES NO

   Are these tests included in the program? YES NO

5. The Project philosohy of "Every Child A Winner" is evidenced by teaching methods and techniques. YES NO

   COMMENTS:

6. A yearly program plan has been made out and is being followed as closely as possible. YES NO

   COMMENTS:

7. The playground is safe and free of debris. YES NO

   Equipment is in good repair. YES NO

   COMMENTS:

8. Full utilization of physical education aides. YES NO

PROJECT I-C-E EPISODE MONITORING REPORT

lease complete this form for each episode you use from the I-C-E guides.

rade/Subject: _____ Concept: _____ Page: _____

pproximate class period for each lesson: _____ hours.

eacher _____

chool _____

		RATING: Below Average	Average	Above Average	Superior	COMMENTS (Continue on back of page if you wish.)
hat did you do? Please circle activity letters to tell which ou did. Note any daptations you ade.						Did the students enjoy the activities? Why?
In Class	A					
	B					
	C					
	D					
	E					
Outside Or Community	A					
	B					
	C					
	D					
	E					
hat did you use?						Which were outstanding or less useful than you had expected? Why?
-C-E References/Resources						
ther publications						
-C-E audio-visual materials						
ther audio-visual materials						
ho did you use? ommunity:						Who? How?
a. Persons						
b. Places						
c. Things						

hat percentage of students ttained the following:	PERCENTAGES 0-25	26-50	51-75	76-100	How do you feel about the results?
ognitive objective(s)					
ffective objective(s)					
kills					

WEEHAWKEN PUBLIC SCHOOLS
WEEHAWKEN, NEW JERSEY

TITLE III ESEA: INDIVIDUALIZED LANGUAGE ARTS DIAGNOSIS, PRESCRIPTION AND EVALUATION

IMPLEMENTATION SURVEY FOR CONSUMER SCHOOL DISTRICTS

Name of School District _____

Name of school(s) involved: Grade(s) -No. of students involved: No. of Teachers:

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____ _____

A. Aspects of the Wachawken Program implemented:

	Yes	No	Degree of Success: Minimal	Moderate	High
1. Setting up local objectives	___	___	_____	_____	____
2. Diagnosis: Taking periodic writing samples	___	___	_____	_____	____
Using diagnostic grid sheet	___	___	_____	_____	____
3. Prescription: Using techniques	___	___	_____	_____	____
4. Evaluation: Using class checklists	___	___	_____	_____	____
Using cumulative writing folders	___	___	_____	_____	____
5. Using program in content and skill areas (e.g., science, reading, etc.)	___	___	_____	_____	____
6. Conducting in-service training	___	___	_____	_____	____
Providing in-service supervision	___	___	_____	_____	____
Developing in-service materials (tapes, sample lesson plans, resource materials)	___	___	_____	_____	____

B. Specific kinds of growth observed thus far by project teacher in children's writing:

_____

_____

_____

_____

C. Kinds of growth observed thus far in other Language Arts skill-areas:

_____

_____

_____

_____

D. General Comments and Reactions:

1. Administrators

2. Participating teachers

3. Students

4. Parents

E. Problems already noted by your project teachers, or anticipated by them in implementing the program: _____

_____

_____

_____

_____

_____

Submitted by_____
(Title or position)

School address_____

_____

DATE_____

School phone number_____

WAYNE-CARROLL ELEMENTARY SCHOOLS
612 West Fourth Street
WAYNE, NEBRASKA 68787

Office of Principal

We feel the most satisfactory method of monitoring adoptors is a visit to the site. This gives us an opportunity to observe how the program is proceeding and even more important it gives the teachers a chance to ask questions, have our staff present a lesson for them to observe, assist in testing or render any assistance the teachers feel they need. We definitely prefer personal visits to any kind of questionnaire. We use the two forms enclosed to give us a quick overview of how the adoption is progressing.

7. Have you seen the Project Success Slide Presentation?
Comments:

8. Have you seen the in-service tapes "Approaches to Learning", the color-sound filmstrips prepared by NewYork Times?
Comments:

9. Have you used the in-service transparencies "Specific Learning Disabilities" prepared by Amidon?
Comments:

10. What type of training or in-service do you find most helpful?
Comments:

MATERIALS

11. What materials that Project Success has lended or shared with you have been most helpful?
Comments:

12. What additional materials, in your estimation, would help you to be more effective with the SLD child?
Comments:

19. Would you like help in the area of Curriculum Modification?
Comments:

Motor Perception

20. Are you using the Motor Perception program with your students?
Comments:

21. Would you like help from the Motor Perception advisor that comes to your building?
Comments:

October 1975

Dear _____,

We are aware of the many problems each adopting school faces when implementing a new program. We feel that the adopting schools are doing an unusually fine job this year. We appreciate the time and effort spent by all involved.

This is a progress check to see if there is any way that we might be of help. Please check the appropriate items for the grades involved in the adoption at your school.

Check if completed.

Kindergarten:
_____Katz Auditory Test
_____Boehm Tests of Basic Concepts
_____Motor Perception Test

Comment:

Grade One:
_____Slosson I. Q.
_____Slingerland Screening Test
Motor Perception Test:_____all students _____LD students only

Comment:

Grade Two:
_____Slosson I. Q.
_____Slingerland Screening Test
_____WRAT Spelling Test
_____WRAT Reading Test
_____Gray Oral
Motor Perception Test: _____all students_____LD students only

Comment:

Grade Three:

_____Slosson I.Q.

_____Slingerland Screening Test

_____WRAT Spelling Test

_____WRAT Reading Test

_____Gray Oral

Motor Perception Test:_____all students_____LD students only

Comment:

Grade Four:

_____Slosson I.Q.

_____Slingerland Screening Test

_____WRAT Spelling Test

_____WRAT Reading Test

_____Gray Oral

Motor Perception Test:_____all students_____LD students only

Comment:

Grade Five:

_____Slosson I.Q.

_____Slingerland Screening Test

_____WRAT Spelling Test

_____WRAT Reading Test

_____Gray Oral

Motor Perception Test:_____all students_____LD students only

Comment:

Grade Six:

_____Slosson I.Q.

_____Slingerland Screening Test

_____WRAT Spelling Test

_____WRAT Reading Test

_____Gray Oral

Motor Perception Test:_____all students_____LD students only

Comment:

Grade Seven - Twelve:

Short statement about the LD program in these grades:

Yes - No

_____Have parent conferences been held?
_____Have parent meetings been held?
_____Do you have volunteer aides?

In what specific way can our staff be of help to you?

Please return to: Mary de Freese
West Elementary School
Wayne, Nebraska 68787

(5A and 6D) See pages 127-128 of What Every Potential Adopter Needs to Know and pages 45-46 of Bringing it into Focus for Facilitators

Follow-up of Adoption

ESEA Title III
Project: PEGASUS-PACE
Tuscaloosa City Schools
1100 - 21st Street East
Tuscaloosa, Alabama 35401

Adopting State _____
School District _____
School _____

ADOPTION PROGRESS REPORT FORM

(due Oct. 15, 1975; Jan 15, April 15, June 15, 1976)

Report prepared by _____ Date _____

School Address _____

City _____ State _____ Zip _____ Phone _____

Principal _____ Number of Teacher Participants _____ Number of Student Participants _____

For each of the following aspects of program adoption, please describe progress made during the present reporting period ending _____.
Date

PROGRESS REPORTED	FEEDBACK NEEDED FROM PEGASUS-PACE
1. The degree to which informal reading inventories have been administered to students entering the PEGASUS-PACE Continuous Progress Reading Program:	1.
2. The degree to which the appropriate diagnostic instruments have been administered to the students in the program.	2.
3. The degree to which teachers are using the Sub-Grouping Charts as a basis for sub-grouping students according to diagnosed need.	3.
4. The degree to which teachers are in the process of developing learning activities for a reading resource file in order to personalize diagnosed instructional needs of students.	4.

The degree to which teachers are reporting to students and parents in a manner appropriate to the PEGASUS-PACE Continuous Progress Program.	5.
The specific staff development activities which have occurred to this point.	6.
The possible staff development plans that have been made for the future.	7.
Any pre-post summative evaluation activity which has been conducted.	8.

any problems have been encountered during this reporting period, please describe the
rategies used to resolve them.

her Comments and Questions:

#'s 1-9 are for monitor to fill out.
#10.....is for classroom teacher.

DALE AVENUE SCHOOL
MONITORING RECORD

TEACHER'S NAME: _____ GRADE: _____

DATE: _____

---

1. Children's working level and material used are appropriate, as indicated by record book.

YES _____

List names of children and work that is not appropriate for them.

_____

_____

_____

_____

_____

_____

_____

2. The following manipulative materials were used during monitoring session:

Puzzles.....____
Parquetry blocks.....____
Blocks.....____
Beads.....____
Pegboards.....____
Seriation boards or cones.....____
Sorting trays (shape or different textures).....____
Clay.....____
Paste.....____
Scissors.....____
Sand play.....____
Water play.....____
Doll play.....____
Housekeeping play.....____
Cut out books.....____
Feeling boxes (different textures).....____
Ball.....____
Crayons.....____
Finger paints.....____
Sewing cards.....____
Board games.....____
Other:

_____

_____

3. Role of teaching aide.

Teaching whole class.....____
Teaching a group.....____
Teaching one child.....____
Other (specify):

_____

_____

_____

4. Teaching was geared to groups_____individuals_____whole class _____.

5. Materials in use in class:

Textbooks....._____
Worksheets....._____
Teacher made....._____
Commercial....._____
Charts....._____
Manipulatives....._____
Language Development Kit....._____
Other:

_____

_____

6. Spontaneous language of children was:

Encouraged by teacher....._____
Permitted by teacher....._____
Not allowed....._____

7. Questions asked of monitor by teacher or aide.

_____

_____

_____

_____

8. Suggestions made by monitor.

_____

_____

_____

_____

9. Performance Objectives taught during monitoring session.

L. N. O. SP. WMS. PMS. ENC/DEC. M. CL.

10. To Classroom Teacher -

(Please tear off bottom of this sheet, fill in form and then give it to monitor, if a follow-up meeting to discuss additional questions is desired.)

I have additional questions and would like to discuss the monitoring session with you in more detail.

NAME:_____

REQUESTED TIME OF MEETING:_____

PROJECT ACTIVE

ALL CHILDREN TOTALLY IN-VOLVED EXERCISING

INSERVICE PROGRAM FOR PHYSICAL EDUCATION RECREATION TEACHERS OF HANDICAPPED

Project No. 72-341, Title III, ESEA, P.L. 89-10

Director – Dr. Thomas M. Vodola (201) 229-4100 Ext. 260

EVALUATION FORM: IMPLEMENTING DISTRICTS

Name_____ School or Agency_____ Date_____

School Address_____ Phone ( )_____

1. What aspect(s) of the ACTIVE program have you adopted?_____

_____

_____

2. Please list number of students involved, grade level(s), and handicapping condition(s).

No. of Students	Grade Level(s)	Handicapping Condition(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. To what extent was the program successful? Explain._____

_____

_____

_____

4. How many teachers were involved in "turn-key" training? (Also indicate area of certification.)

_____

(Number) (Certification)

5. Please list the specific school(s) involved, address(es) and contact person(s).

School	Address	Contact Person
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOWNSHIP OF OCEAN SCHOOL DISTRICT, DOW AVE., OAKHURST, N. J. 07755

PRESCRIPTIVE PROGRAM AND CLASSROOM DELIVERY SYSTEM

Language Arts

13. Did you participate in the Summer Workshop?
Comments:

14. Are you using the complete language arts process taught during the workshop?
Comments:

15. If you are not using the total process, what parts are you using?
Comments:

16. Would you like help from the Language Arts advisor that comes to your building?
Comments:

Curriculum Modification

17. Are you using Curriculum Modification techniques with your students?
Comments:

18. In what curriculum areas are you using Curriculum Modification for the SLD child?
Comments:

DIAGNOSTIC PRESCRIPTIVE ARITHMETIC
PROJECT COORDINATOR'S SURVEY

State_____ Date_____

School District_____

_____

Number of schools in district_____

Number of teachers trained in D.P.A._____

Number of teachers implementing D.P.A._____

Number of supervisors trained in D.P.A._____

Number of schools involved in the program_____

Number of students pre-tested.

_____Grades 2-3 _____Grades 4-5 _____Grades 6-7

Total_____

Number of students involved in the program now.

_____Grades 2-3 _____Grades 4-5 _____Grades 6-7

Total_____

Do you plan to continue the program next year?_____

If not, why?_____

_____

_____

Do you plan to expand the program?_____

_____

Have you identified potential teachers of teachers to help with program expansion?_____

Additional Comments:_____

_____

_____

Part V Newsletters

Parent Readiness Education Project (DD)

St. Paul Open School (DD)

Health and Optimum Physical Education (DD)

Project Active (DD)

Wisconsin Center for Innovative Programs (SF)

Illinois Statewide Facilitator Project (SF)

Project Link (Kansas) (SF)

prep preschool press

A newspaper for preschoolers prepared by the Parent Readiness Education Project

February, 1975

r Parents:

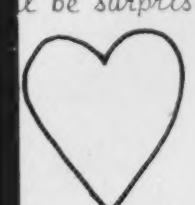
Recently parents have been asking about ld management techniques. This is a timely ject because youngsters are in the house underfoot during the winter months.

One approach that may help develop a har- ious atmosphere is a technique called posi- e reinforcement--calling attention in a itive way to the things that the child does t we like and that we want him to continue. theory behind this technique is simple: hild seeks our attention and our approval. is likely to repeat the behaviors that he lizes are pleasing us. Therefore, our goal uld be to praise and call attention to the ngs the child does that we like and to play n (as much as possible) the actions that we not like.

e all use this technique unconsciously. We pliment our child's efforts. We smile to w our approval. We praise good behavior. IDEA OF POSITIVE REINFORCEMENT IS TO DO THIS Y SAME THING IN A PLAYFUL AND CONSCIOUS WAY. How do you do this? Consciously use smiles, tures, and verbal comments when you really e what your child is doing such as playing structively, eating well, dressing herself. e an impromptu hug and kiss and say that enjoy watching her play. Comment to others ut how proud you are of your youngster while is within earshot. At bedtime recall some- ng specific that she did earlier in the day. Also think about more concrete rewards for d behavior. Do something special together. your child choose an activity or game to y with you. Give your child an unexpected at. Occasionally present him with an in- ensive surprise. For example, "You got ssed all by yourself so now you can help me e your favorite cookies." "You waited your n during the game so now you get to choose next game." "Let's hang your beautiful ture in the window."

Youngsters of all ages respond to positive nforcement. It will take time for a child's ative behavior to change. However, if the ttern of using reinforcers is consistant, you l be surprised at your child's responses.

Good Luck!
The PREP Staff

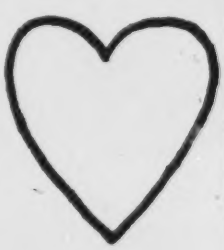


Hello, Boys and Girls,

Do you know that when it is cold and snow is on the ground, birds have a hard time finding things to eat. You can help them by leaving small pieces of bread outside. You can also make a bird-feeder with help from your mom or dad. You need a paper cup, a piece of string, peanut butter, and some bird seed. Ask your mom to punch a hole in the bottom of the cup. That will be for the string. Then use your finger and put peanut butter all over the paper cup---cover it as much as you can. Then roll the cup in the bird seed. The seeds will stick to the cup. Now it is ready to be hung outside on a tree. The birds will come and eat the seeds and the peanut butter. It will be fun to watch them. The little brown birds that you see outside are called sparrows. If you listen carefully, you can hear them, too.

A holiday this month is Valentine's Day. Sometimes boys and girls give cards to their friends with pictures of red hearts on them. You can make a Valentine card, too. If your mom draws a heart, you can color it red and give it to a friend.

Happy Valentines Day,
Your friends, Penny and Peter



Arts and Crafts

SNOWMAN

During this activity, emphasize shapes, numbers, differences in sizes, spatial relations (which circle is on the top? On the bottom?), and language (talk about snow, winter, cold weather).

WHAT YOU NEED: white paper for snowman circles
3 circle stencils (use lids, cups, anything round)
paste, scissors
background paper or bag for puppet

WHAT YOU DO: 1. Hold the stencils while your child traces a small, medium, and large circle. 2. Have him paste them to make a snowman. 3. Add arms and a hat. 4. To make a puppet, paste circles on a lunch bag.

Cooking Corner

This cooking activity focuses on shape recognition. Continue to emphasize verbal skills, as well. Include words that refer to touching and textures---the dough feels soft, smooth, flat, round, cold. Opportunities for counting will arise, also. Ask your child why they cookie dough goes into the oven. Have your child listen for the timer. Involve your child as much as possible from beginning to end.

SHAPE COOKIES

1 cup shortening
2 cups sugar
6 cups flour
1 teas. salt
1 teas. baking soda
1 teas. vanilla
1 teas. lemon extract
1 cup sour cream

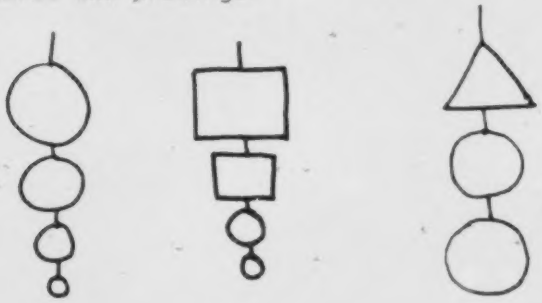
1. Cream shortening and sugar until light. 2. Add sifted dry ingredients, flavoring, and sour cream. 3. Mix well. 4. Chill several hours. 5. Roll out to 1/8" thickness and cut into circles, squares, triangles, hearts, and other shapes. 6. Bake 350°, 10-15 minutes. Makes 6-8 dozen.

Let's Cut and Paste

SHAPE MOBILE

WHAT YOU NEED: paper, white or colored
scissors
string or yarn - 18" long
tape

WHAT YOU DO: 1. The final product will consist of a number of shapes taped on to a piece of yarn. If this is hung near a vent, it will turn. 2. Have your child trace and draw circles and squares of different colors and sizes. Talk about what he is doing. 3. He should then cut out the shapes and tape them to the yarn. 4. A variety of these can be made with variations in size, color, and shapes. 5. The shapes can also be decorated with pictures and drawings.



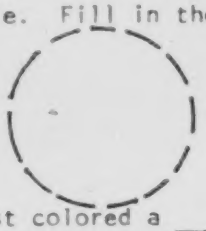
Let's Look at Shapes

Many preschoolers are ready to name and circles and squares. This activity consis naming, tracing, and coloring shapes.

WHAT YOU NEED: crayons
pencils

WHAT YOU DO: 1. Read each sentence to yo child and talk about each shape. 2. After he draws and colors each shape, talk abou the name again. Then read the second sent and fill in the blank.

I am round. I look like a plate and a pi I am a circle. Fill in the lines and col me.



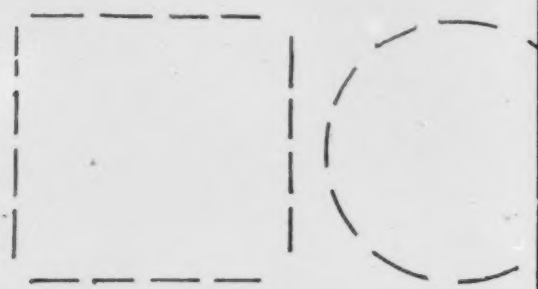
You have just colored a _____.

I have four sides. I am a square. Fill the lines and color me.

You have just colored a _____

Other activities for experiencing shapes:

- .Make circles by tracing around cups ar lids.
- .Make squares out of toothpicks and str
- .Take a shape walk. Talk about shapes t you see around the house.
- .Look for shapes in magazines and books
- .Make rainbow squares and circles by dr ing each shape and having your child c over it with several different crayons



Redford Union School District No. 1 18499 Beech Daly Road, Detroit, Michigan, 48240

ST. PAUL OPEN SCHOOL

Adoption/Adaption News 2

December, 1975

MANY THANKS!

To all who complimented us on the first issue of this short newsletter. The response indicates that people with whom we've worked do want to keep in touch and are eager to hear what's happening in other places.

NEWS FROM PEOPLE WHO HAVE BEEN HERE:

IOWA: At the request of several staff members of Urlandale's (senior high) school within a school, Joe Nathan will be visiting for a day late this month. The school seems to have survived the "first trimester/semester bumps" of any alternative school. We hope to have a student exchange with Urbandale later in the year.

MICHIGAN: We hear that the school within a school in Grand Rapids has picked up almost unbelievable parent support. Apparently the staff members took the suggestion we made to meet with parents before school began to explain the program and set individual goals with students and their parents. (This information comes from Mike Syropoulos, Michigan Facilitator).

MINNESOTA: At the request of Al Boonstra, Principal at Willmar, 2 Open School staff members visited last month to talk with Willmar staff about the advisor/advisee system and use of volunteers. Augusta Strowder and Robin Petersen reported a good deal of interest in Willmar and strong support from Al.
Nancy Carlson of the Open School staff presented our program at an awareness conference set up by Dick Hegre. Some interest was expressed and we hope to work further with folks "up north."
We'll meet next week with several staff members at St. Paul Central's School within a School who expressed interest in how we take cross country trips and administer our competency-based graduation requirement system. This gr system seems to be of great interest wherever we go.

NEW MEXICO: Jan Fiola of Open School staff and Dr. Mike Patton, our evaluation contractor and advisor, will visit Dulce, New Mexico December 15-16 to meet with administrators and teachers there who are developing an adaption of our program. Last March several people came here for training from Dulce. Thanks to George Smith, New Mexico Facilitator, who helped set up this return visit.

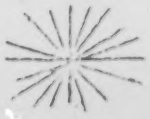
NEW YORK: We're trying an experiment December 18-19 with the New York facilitator. We'll do a 2 day training (not awareness, but training) workshop in Syracuse on 3 of our 5 components. If successful, we'll be available to come to various states to put on training workshops. We remain convinced that the best thing for adopters/adapters to do is spend time at St. Paul Open School. However, we recognize the finances of the network don't always allow that.

OREGON: At the request of Ann Mathews, Oregon Facilitator and the Eugene Public Schools, one of our staff spent a week talking with people who've come here for training and meeting with other potential adapters. Betty Lampland reported that

OREGON (continued) Eugene has a very strong commitment to alternatives and has developed over a dozen. Most are of the school within a school variety. Betty also mentioned the "prophet in one's own land" phenomenon lives in Oregon. That is, outsiders often are listened to more than people in ones own town, even if the hometowners are saying the same thing. This reminds us of the definition of an expert on education: "Some son (or daughter) of a gun from out of town with a slide show!!" The prophet in ones own land phenomenon is a frequent thing, however. In some ways, we can help with this (and are trying to). Sometimes we can advocate for and with people in their districts (and vice versa-letters from adopters/adapters to our superintendent and school board saying we've helped ALWAYS are welcome).

SOUTH DAKOTA: We'll soon be setting up a visit to Sioux Fall's Compass Alternative School, at the request of JOhn Eggers, Director and Anna Maravelas, S.D. Facilitator. Looks now like sometime in January or February.

MASSACHUSETTS: Since 2 staff members of Cambridge's Alternative Public School attended the 1 week training workshop in November, we've received several letters from them talking about their impressions of the workshop, ways it could be improved, and what they'll be doing to implement some of the ideas they picked up here. They were particularly interested in our rural-urban exchange and student social action projects. They suggested that we should try to pull together people who've been in a program for a while (as they have-over 4 years) and people who are just starting. It's a good idea-and we'll try to do something along those lines later in the year.



WHAT ABOUT THE ALTERNATIVE PROGRAM WORKSHOP?

At the USOE National Diffusion Network conference in Washington, we suggested trying to put on a training workshop which would bring together several alternative D/D's. Plans are moving ahead with this, and we hope to have information out to facilitators regarding details in mid-late January. So far, the dates are April 5-7, and the participating D/D's are Alternative Learning Program, Focus, Rumson-Fair Haven Senior Elective Program, St. Paul Open School and Urban Arts.

INFORMATION YOU MIGHT WANT TO WRITE FOR:

We've received packets from 2 very exciting teacher centers, one in Kansas City and one in Berkeley. The Kansas City center is called The Learning Exchange. Write to them at 2720 Walnut, Kansas City, Missouri 64108, and be sure to ask for a list of publications. Same with The Center for Open Learning and Teaching, 178 Tamalpias Road, Berkeley, California 94708. This is being run by, among others, Herbert Kohl.

FINALLY....

To all who've worked so hard to share ideas for more effective learning,

Our very best wishes for a relaxing, joyful holiday season. See you next year!

Health and Optimum Physical Education Now!

Vol 1, No. 5 January 1975 Irwin County Schools, Ocilla, Georgia 31774

FROM APPLE CRATE TO THE NATION

When Martha Owens first conceived the idea for Project Health and Optimum Physical Education, she housed all her research and writing in an apple crate in her own home office. Now, five years later, the director's working space covers all 50 states as Health and Optimum Physical Education's model program is implemented from Georgia to California.

Health and Optimum Physical Education is now part of an effort by the USOE to make successful educational practices available to all schools in the nation. This effort is double pronged: Developer-Demonstrator Projects (Health and Optimum Physical Education is one) function as observation and training sites; Facilitator Projects in each state serve as middle-men, advising school systems about Developer Demonstrators and helping schools adopt those projects determined suitable for their needs.

Judging from the response to Project Health and Optimum Physical Education, the USOE's "diffusion network" is a fine success.

In Georgia, seventeen school systems have adopted the project program, and the project director and program director have been busy training teachers, informing administrators and consulting with the staff in these "second generation" projects. Atlanta's Christ-the-King School has made unusual headway in implementing the program. Wayne County Schools (Jesup) report fine progress also. Coffee County has held three night meetings for parents and has formed a planning committee in first steps toward implementation.

Initial negotiations for training adoption are underway outside the state also. Schools in Utah, South Carolina, Texas, New Mexico, Nebraska, Iowa and Oklahoma are among potential adopters.

Second generation project gets underway in Wayne County. John Donaldson is project coordinator.

P.E. COORDINATORS HEAR OF PROJECT

Project Director Martha Owens was a featured speaker at the National Convention of Physical Education Coordinators at Gull Lake, Michigan this fall. The gathering included professional physical educators from across the country.

Mrs. Owens presented an overview of Project Health and Optimum Physical Education and showed the movie, "Every Child a Winner." The presentation also included information about the USOE's diffusion network and the function of developer Demonstrators and Facilitators.

In addition to the Michigan presentation, Mrs. Owens and Program Director, Susan Rockett, conducted workshops for adopter schools in Jesup, Cordele, Atlanta, and Waycross, Ga. A statewide workshop was held on the project site in August and a one-day workshop conducted again in November. Out-of-state workshops are being conducted in Texas and New Mexico, with several out-of-state trainers on-site in January.

Dissemination Specialist Syd Blackmarr presented the project and the film to the Georgia Council for Exceptional Children at their conference in Macon. Mrs. Rockett was featured speaker at two large gatherings of parents and administrators in Coffee county.

200 VISITORS VIEW PROJECT

The project schools have been officially open for visitation since October 1. During that time, visitors from Texas, North Carolina, Oklahoma and Kentucky have toured the sites at Irwin Middle and Irwin Elementary Schools. South Carolina, Nebraska, Iowa, and Utah have been on site for training. Many educators from Georgia have observed the model program in action. A large group from Georgia Southern College viewed lessons in mid-October, and two sizeable groups from N. W. Georgia CESA, where Tommye Yates is consultant, have also been to the model program.

Visitation involves a 30-minute briefing on project background and the daily lesson, a showing of the project film, "Every Child a Winner", plus tours of the program at both schools. The project staff has hosted over 200 visitors since the school term began.

Trainers from Nebraska, Utah and South Carolina train on site.

HEALTH AND OPTIMUM PHYSICAL EDUCATION
ESEA TITLE III SECT. 306
BOX 141 A TELEPHONE 912-468-7098
OCILLA, GEORGIA 31774

MR. RUDENE GENTRY
SUPERINTENDENT

MRS. SUSAN ROCKETT
PROGRAM DIRECTOR

MRS. MARTHA OWENS
PROJECT DIRECTOR

MRS. SYD BLACKMARR
DISSEMINATION SPECIALIST

Lesson on Giant Map is one of scenes in project film, "Every Child a Winner"

EVERY CHILD A WINNER IS A WINNER

Reports from many sources are that the project film, "Every Child a Winner", is a winner everywhere it's shown.

The film was viewed in Hawaii recently and an extra showing was necessary in order to accomodate all those who had heard the "rave" reviews from friends, catching one of four other showings.

Lowell Boberg, Utah Facilitator, reports excellent response from Utah physical educators upon viewing the film, and Elinore Darland, Director of PEPI-AAHPER Information called to say that a group of New York educators dubbed "'Every Child a Winner' the best elementary film in years". Filmed on the project site last spring, it is designed for use by physical educators, elementary educators, and makes an exceptional tool for introducing parents and community to the values of movement education.

The film is available for rent or purchase from NEA Sound Studios, 1201 16th Street, N. W., Washington, D. C. 20036.

CURRICULUM GUIDE IS NOW AVAILABLE

The curriculum guide, "Every Child a Winner, a Practical Approach to Movement Education", is in the final stages. At the time of this writing, final proofs have been approved and a ready-date of February has been set by the printer.

The guide, two years in the writing, contains sample lesson plans, project-proven teaching methods, steps for writing accountable lessons and ideas for program planning.

Classroom teachers as well as physical educators will find the book a useful aid in teaching movement to children in grades 1-6.

Order forms will be mailed to all Facilitator Projects, as well as to anyone who has written for information about the project.

S. Blackmarr, M. Owens, Susan Rockett proof final galleys of guide.

Appreciation For Community Effort . . .

A great deal of the success of Project Health and Optimum Physical Education is based on the outstanding cooperation of the Irwin community. Parents, civic groups, community leaders, retired citizens, business concerns, medical professionals, as well as school administrators and staff have been highly supportive of project endeavors.

In gratitude and recognition, Project Director Martha Owens recently presented a number of Appreciation Awards on behalf of the project. The red, white and blue award features the project symbol of a child and a tire, and proclaims, "The Project Health and Optimum Physical Education Award is presented in recognition of outstanding service to Health and Optimum Physical Education, Title III, ESEA, and dedication to the ideal of 'every child a winner'."

Awards were also presented to consultants and others in the education field who have made outstanding contributions to the project.

STAFF ANSWERS THE NATION

Secretary-Bookkeeper, Peggy Bess, and Clerical Aide, Sibyl Ross, ready packets for mailing.

The project staff has been answering the many requests for information that are coming in daily from across the nation. Approximately six-hundred packets containing mimeographed materials, pamplets, and general information about Project Health and Optimum Physical Education have been mailed during a 5 month period; 50 states and 6 foreign countries are represented in the project letter files. Requests range from informal notes from Grandmothers to formal requests for detailed information from colleges, universities and state department of education personnel.

Model Program Continues at Both Irwin Schools

Instructor Ricky Ross and Aides Betty Paulk and Irishtine Williams discuss the day's lesson plan.

Allen Smith, 1-3 Instructor, and Aides, Liz Taylor and Gloria Edwards, work with 1st graders on "levels."

Project ACTIVE Newsletter

Thomas M. Vodola, Ed.D.
Township of Ocean School District
Dow Avenue
Oakhurst, N.J. 07755
(201) 229-4100 Ext. 260

Title III-IVC, ESEA
Volume 4, No. 4
Project No. 72-341
December 1975

CTIVE PROGRESS REPORT

Awareness V Workshop, Rhode Island. The workshop was attended by approximately 120 participants; approximately 60% administrators, 25% classroom teachers, 10% Physical Education instructors and 5% Special Educators.

Project ACTIVE was one of four Title III Validated programs being presented. (First Step, Teacher Effectiveness Training and Program Budgeting were also presented.)

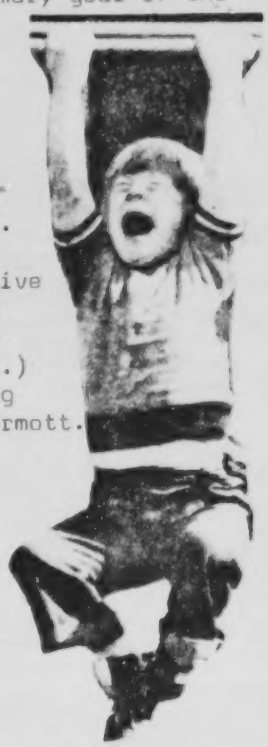
Project ACTIVE's presentation consisted of the following:

1. Introduction of presentor and explanation of his involvement with Project ACTIVE.
2. Presentation of P.A. training film.
3. Embellishment of film topics:
   - Need for Program (establishing population)
   - Advisory Council
   - Question, Answer
   - Practicum experience in determining nutritional status and Vital Capacity

Tentative plans for a training program at Rhode Island College have been established. Dr. Sinclair, State Facilitator, has established within his state a training program. Based upon grant application and community needs a population for the training session will be selected.

(Submitted by Tim Sullivan, Cadre Team member.)

Hurley School, Wall Township, Conducts Vigorous Physical Activity Program. All students are provided individualized physical activity on a daily basis. The primary goal of the Hurley program is to provide all students with a broad-based movement education and physical fitness program so that the children can develop those skills necessary for optimum functioning in all future endeavors. Mr. Anthony Vodola, the physical education teacher, contends that, initially, the children are very apprehensive, when requested to perform certain tasks (see photo on right). However, Mr. Vodola continues, "Constant prodding, individual assistance, and positive reinforcement will result in the child overcoming his fear and performing the desired task." (See photo on the left.) Pictures depict the instructor applying the teaching strategies to Mathew McDermott.



- D&A (Developmental and Adapted P.E.) Theme Song. In April 1975, Mrs. Pam Galatro, a D&A staff member in the Township of Ocean School District, decided a program theme song was needed. Thus, she composed the following lyrics to be used in conjunction with the tune "Tea For Two." Let's all sing along.

- ACTIVE Television Date Finalized. The nationally validated program will be presented on Monday, December 8, 1975, 7:30 P.M. on Channel 7. The tentative title of the program is Special Report: The Learning Disabled.

SAY HOORAY FOR D&A
YOU'RE O.K. WITH D&A
IT'S ALL THE WAY
WITH D&A - ALONE!

INDIVI-DUALIZED INSTRUCTION
FOR KIDS OF
ALL AGES
AND DR. VODOLA
HAS WRITTEN
THE PAGES
THAT HELP US TEACH
THIS PERSONALIZED
PHYS. ED. HERE
L-M-A OR L-P-V OR
ANY POSTURE DEFI-CIENCY
CAN BE IMPROVED BY
OUR ACT-IV-I-TY!

TEST, ASSESS
PRESCRIBE, EVALUATE
WE BRING THE CHILDREN'S
COORDINATION UP TO DATE
AND THEY'LL STAY TRIM
WHEN THEY TAKE SPECIAL GYM!

- Montclair State College Maxi-Training Program Date Changes. The training program dates have been revised. The ten sessions will be conducted on the following dates:

  February 7, 10, 14, 17, 21, and 24, 1976
  March 6, 9, 13, and 16, 1976

  For further information, contact Mr. Tim Sullivan (201) 783-4561.

- Physical Fitness Manual Available. The manual Developmental Physical Education: Low Physical Vitality is available for sale. The cost of the manual is $4.00. If interes in purchasing the text, please remit a check or money order with the request.

  (Editor's Note: The five other kit manuals are in various stages of development and should be available for release on a monthly basis. Availability dates will be includ in subsequent issues of the Newsletter.)

- ACTIVE Cadre Team/Advisory Council Meeting Dates. Team members will meet on Friday, December 5, 1975, 6:30-9:30 P.M. in the Project Director's Office. The Advisory Counc will meet on Friday, December 12, 1975, 9:00 A.M. to 12:00 noon in the Conference Room of the Wayside School Please forward letter of intent or call the Office.

- University of Nebraska at Lincoln Sponsors ACTIVE Training Program. Thirty physical educators and special educators took part in a three-day training program held at the CHAP School in Bellevue, Nebraska. Those in attendance were provided a variety of experiences working with TMR children. The focus of the entire workshop was on the development of teacher strategies related to the diagnostic-prescriptive process. The underlying theme was that teachers should have a rationale for all activities that they prescribe for their students. Special thanks are accorded to: Joanne Marachale, Principal, CHAP School; Dr. Norma Sue Griffin, Professor, University of Nebraska at Lincoln; and Glenn Clarkson and Bob King, Iowa-Nebraska State Facilitators for their total support and cooperation. Above all, a commendation to the trainees involved; the Project Director has seldom had an opportunity to work with a group of teachers

who are so dedicated to improving the well-being of our special children.

(Editor's Note: As a result of the program, a minimum of eight schools in Iowa and Nebraska will be implementing some aspect of the individualized-personalized program.)

Long Branch School District Adopts ACTIVE Program. One of the factors one must consider before adopting a new program is program flexibility. Is the design of the program one that can readily be adapted to varying school environments? In the photo, Don Welcome, D&A teacher, tests the motor performance of his students in their regular classroom. Mr. Welcome is presently assessing the performance of all "classified" children in the district. His efforts have been successful because he has received the cooperation of the special education teachers, the Director of Special Services, and the Director of Elementary Education. The ACTIVE office has provided all necessary test forms and will compute individual time prescriptions so that each child receives a program tailored to meet his or her needs.

(Editor's Note: The district is to be commended for providing a physical education program for all handicapped students.)

ACTIVE Involvement Engenders Self-Confidence. Mrs. Judy Minnitti, Cadre Team member, conducted an individualized physical activity program for the Atlantic County ACLD organization this past summer. Mr. & Mrs. Jospeh Jasiecki gave indication of their response to the program in the following letter.

September 22, 1975

Dear Judy:

I just had to drop you a line. Joey's just starting his 4th week of school and everyone who has worked or is presently working with him has taken the time to contact me. They wanted to know what we did with him this summer. They all noticed great improvement in all areas and especially the build-up of his self-confidence. I informed them all of Project ACTIVE and you. ACLD just had an opening meeting and several parents also mentioned great improvements with their children. We all feel great about our children's progress, so I felt you should share some of the same feelings.

We thank you very much. Hope to see you soon.

Sincerely

Joe & Kathy Jasiecki

Have Bags--Will Travel. To further insure that subsequent awareness efforts and training programs will be most meaningful to participants, the project has procured six, large travelling bags. Each bag will contain most of the supply/equipment items necessary for program implementation. Cadre team members will make the kit available for review upon request.

ACTIVE On The Move. Awareness workshops and training programs planned for the future:

New Jersey

Site	Date	Instructor(s)	Program
Kean College of N.J.	November-December, 1975	F.June Graf/Michele Bjelis	Clinics
	Contact Person: Edith Resnick, Physical Education Dept. Union, N.J.		

Site	Date	Instructor(s)	Program
United C.P. Center Union	January 5, 1976	Mr. Tim Sullivan	Awarenes
	Contact Person: David Hirsch (201)354-5800		
Monmouth College	January-February, 1976	Pete Cheney/A. Vodola	Mini-worksh
	Contact Person: Pete Cheney (201)776-5333		
Winchell Orthopedic School Atlantic City	February-March, 1976	Judy Minnitti/R.Lipoti	Mini-worksh
	Contact Person: Judy Minnitti (609)494-2341		
E.I.C.-N.W. Cedar Knolls	January-March, 1976	Robt.Fraser/T.Cicalese	Maxi-worksh
	Contact Person: Thomas Cicalese (201)627-3500		
Montclair State College	February-March, 1976	Tim Sullivan/Ed Korzun	Maxi-worksh
	Contact Person: Tim Sullivan (201)893-5243		
Rutgers University	February-May, 1976	Robt. Ekblom/Guy Cornish	Maxi-works
	Contact Person: Robert Ekblom (201)566-1000 Ext. 381 or 258		
Out-of-State			
Louisiana	November 17-18, 1975	Tim Sullivan	Awarenes
	Contact Person: Bob Wall (504)355-3575		
Illinois	December 8, 1975	Robert Ekblom	Awarenes
	Contact Person: Lloyd Sullins (618)745-9415 (9416)		
Upper Merion School District Pennsylvania	to be determined	Pete Cheney/A.Vodola	Mini-worksh
	Contact Person: Carolyn Trohoski (215)265-6056		
EDA Convention Pennsylvania	March 9, 1976	Thomas M. Vodola	Awarenes
	Contact Person: John Imgrund, Jr. 27 Orchard Lane Livingston, N.J.		

- Film Progress Report. Dr. Martin Rudnick, Film Director, Montclair State College, submitted the following progress report:

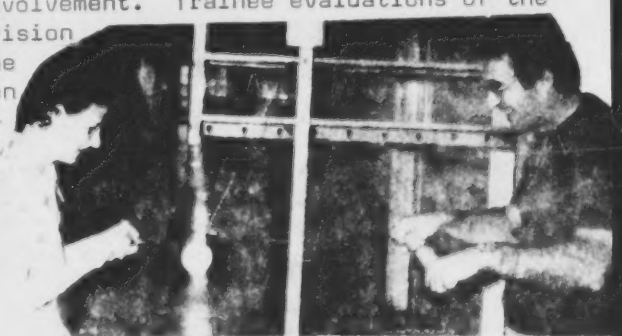
  -Most of the narrative materials have been taped

  -Film clips of programs will be taken during the next two months

  -Copies of the film should be available for distribution by March 1, 1976

  (Editor's Note: The film will be made available for group presentations on a no-fee basis. If interested in scheduling a viewing, please contact the Project Director and indicate <u>two</u> alternate dates.)

- Jersey City Mini-Workshop Stresses Teacher Involvement. Trainee evaluations of the ACTIVE workshops unanimously endorse the provision of students so that the teachers can <u>apply</u> the skills and strategies presented. The photo on the right shows a student and teacher practicing one of the many tasks that one can prescribe to improve eye-hand coordination and accuracy.



  (Editor's Note: The close-working relationship of teacher and student stressed in all training sessions results in a very positive relationship between both parties. This strategy is part of the "personalization" process which is espoused by ACTIVE.)

Statewide Impact of the Individualized-Personalized (IP) Physical Activity Program. ACTIVE has conducted many research studies which have indicated the IP process is superior to traditional programming (group activities). However "statistical significance" may not be "educationally significant," i.e., the pupil gain scores may not have been large enough to warrant program support and adoption. To clarify the aforementioned, the Project director has written an article for publication.[1] Excerpts of the article have been provided below.

TABLE I

MOTOR ABILITY DATA, 1973-74

School District	n	Age	Sex	MAI Pre	MAI Post	% Gain	Handicapping Condition
Twp. of Ocean	20	6-10	M/F	30.00	35.60	19%	Low Motor Ability (LMA)
West Long Branch	15	6-8	M/F	45.46	69.33	52%	Normal (N), LMA
Red Bank	18	6-9	M/F	25.66	43.66	70%	Neurologically Impaired(NI)
Jersey City	15	7-12	M	43.29	60.93	40%	Emotionally Disturbed (ED)
				1974-75			
New Lisbon S.S.	24	12-55	M	25.92	39.00	54%	Severely/Profoundly Retarded (SPR)
Livingston	6	6	M/F	65.00	77.67	19%	Physically Gifted
Cape May ACLD	11	8-12	M/F	56.10	75.40	34%	Perceptually Impaired (PI), NI
Monmouth County ACLD	47	5-11	M/F	53.91	66.14	23%	PI, NI

TABLE II

PHYSICAL FITNESS DATA, 1973-74

School District	n	Age	Sex	PFI Pre	PFI Post	% Gain	Handicapping Condition
Twp. of Ocean	18	6-14	M/F	39.25	45.25	15%	N, NI, PI
Asbury Park	8	6-10	M/F	33.00	48.88	48%	Low Physical Vitality (LPV)
Red Bank	18	6-9	M/F	27.15	45.83	69%	NI
				1974-75			
Dumont	28	5-10	M/F	47.75	57.43	20%	Educ. Mentally Retarded (EMR), PI
Morris Hills	17	14	M	38.76	46.59	20%	LPV
Paramus	13	5-6	M/F	41.69	61.31	47%	LPV
Lawrence Harbor	12	7-12	M/F	27.13	34.76	26%	LPV
Cap May ACLD	11	8-12	M/F	22.30	37.40	68%	NI, PI

ANALYSIS OF THE DATA

1. Handicapped children made gain scores comparable to, or beyond, those attained by the normal population.
2. Children from school districts and agencies throughout the state equalled or surpassed the gain scores made by the children in the Township of Ocean School District.
3. Cumulative benefits are derived from program involvement for more than one year (data not included).

[1] Thomas M. Vodola, "The Educational Significance of Project ACTIVE's Individualized-Personalized Physical Activity Program on Handicapped Students in the State of New Jersey," Oakhurst, N.J.: Township of Ocean School District, November, 1975.

CONCLUSIONS

1. IP physical education improves the motor and physical fitness level of children exhibiting any handicapping condition.
2. Motor and physical deficiencies exhibited by handicapped individuals are most frequently attributable to environmental deprivation rather than hereditary factors.

(Editor's Note: Thanks are extended to the many teachers and administrators from the districts cited for their cooperation. The Project Director would appreciate receiving reports from other schools which have initiated aspects of the ACTIVE program. If permission is granted, the data will be included in subsequent issues of the Newsletter.)

- Instrument for Assessing the Motor Performance of the Severely or Profoundly Retarded. Hollis Fait developed the original instrument which was modified by Sherrill and others at Texas Women's University.[2,3]

  The instrument referred to as the Basic Movement Performance Profile (BMPP) includes twenty criterion-referenced items for assessing the performance of severely or profoundly retarded students who are ambulatory. Cadre Team members (Anthony Vodola, Hurley School Wall Township, and Roy Lipoti, New Lisbon State School) have indicated the instrument to be of value for use with the trainable-profoundly retarded population. They deemed the instrument beneficial because it includes:

  -the delineation of tasks so that every individual's performance can be assessed

  -an objective profile of strengths and weaknesses which aids in the subsequent prescription of activities

  (Editor's Note: The data submitted to the DD site is being accumulated until such time that norms can be established. In addition, correlational studies will be conducted to ascertain whether chronological age, mental age, or I.Q. is the best predictor of motor proficiency.)

NEWS FROM AROUND THE STATE

- Cherry Hill School District Sponsors A Series of Seminars On Behalf of The Preschool Exceptional Child. The Board of Education extends an invitation to you and/or any member of your organization to attend. The dates and topics are as follows:

  1. Friday, January 23, 1976, 1:30 P.M. Topic: "Genetics and Learning Disabilities"
  2. Wednesday, February 11, 1976, 7:45 P.M. Topic: "Language Development and Learning Disabilities"
  3. Friday, March 26, 1976, 1:30 P.M. Topic: "Psychiatry and Exceptional Children"
  4. April, 1976. Topic: To be announced

  The seminars, which are free of charge, will be held at the Thomas Paine School, Church Road, Cherry Hill, New Jersey. Specific details can be obtained by contacting, Mrs. Martha Kilmartin, (609) 424-1020.

- Funds Available for Adopting a Validated Project. Are you interested in adopting ACTIVE or one of the other validated programs? Do you find your efforts stymied due to the financial "crunch"? If so, your district may qualify for financial assistance. For additional information, contact:

  Mrs. Diane Weintraub
  Dissemination Coordinator
  EIC-NW
  Cedar Knolls, N.J.

  Mr. Charles Barthe
  Dissemination Coordinator
  EIC-South
  Pitman, N.J.

  (Editor's Note: Districts in NE should contact NW; districts in Central should contact EIC-South.)

---

[2]Developed for the Department of Physical Education, Mansfield Training School, Mansfield Depot, CT. Appears in Fait, H.F.: Special Physical Education: Adapted, Corrective, Developmental. Philadelphia, W.B. Saunders Co., 1972, pp.208-210.

[3]Texas Women's University Modification of the Basic Movement Performance Profile.

WS FROM OUT-OF-STATE

ACTIVE Overview at the University of Georgia. Herman Jones, a graduate student, researched the validated project and presented a comprehensive profile in Dr. Ernest L. Bundschur's adapted physical education course. Mr. Jones developed some visual aids materials which were incorporated in his presentation and then forwarded to the project director.

(Editor's Note: The visual aids materials will be on display at all subsequent workshops conducted by the P.D.)

Individualized-Personalized Physical Education Introduced in California. Jim Cowart, Remedial Physical Education Specialist in Hayward, California, indicated that he has implemented aspects of the motor ability program in his curriculum and the efforts have proved very successful. Presently he is considering experimenting with the revised instrument for use with TMR children.

(Editor's Note: Keep up the fine work Jim. If ACTIVE can be of further assistance, please advise.)

National Center for Educational Statistics. The Center has collected some data that may aid you in preparing a rationale for program adoption. The articles include:

-Number of Pupils With Handicaps in Local Public Schools, Spring 1970.
OE 73-11107. HE 5.2:H 19/11/970. 30¢

-Professional Staff for the Handicapped in Local Public Schools, Spring 1970.
74-214. 50¢

-Provision of Instruction to Handicapped Pupils in Local Public Schools, Spring 1970.
OE 74-11114. 45¢

-Statistics on Education of the Handicapped in Local Public Schools, Spring 1970.
OE 74-11113. $5.10

If interested in any of the documents, submit a check or money order to:

U.S. Government Printing Office
Public Documents Department
Washington, D.C. 20402

TEWORTHY PUBLICATIONS

The Physical Activities Report, Issue No. 401. Includes the following articles:

-Providing Extra Motor Skills Instruction for Poorly Coordinated Pupils

-A Sensory Motor Skill Program for Learning Disabled Children

-Exercises To Help The Neuropathically Handicapped

-Adapted Physical Education For High School Students

-What To Teach and How To Teach The Mentally Retarded

For further information, contact: Mr. Lowell Klappholz, Institute for Physical Education, Old Saybrook Connecticut 06475.

Learning Disabilities Guide. A new publication which will deal with both learning disabled children and other special needs children who are in the public schools. It will have two main sections: articles of special interest and an insert that contains specific lesson plans for use with handicapped children. The September 1975 issue includes:

-Do students you know have difficulty keeping their balance as they run or skip? Gross motor difficulties are discussed in "Downstairs, Upstairs," page 3.

-Many students who exhibit one learning disability often have others. "Lend a Hand" reviews fine motor control problems, page 4.

-In "One to Ten," altogether different issues are considered. This case illustration

is a content-oriented discussion of pre-skills necessary for arithmetic, page 6.

For further information, contact: Amby Burfoot, Editor, Learning Disabilities Guide, 24 Rope Ferry Road, Waterford, Connecticut 06385.

INNOVATIVE PROGRAMS/MATERIAL SOURCES

- The projects cited below have been funded through ESEA, Title III-IVC. Each project has been validated and as a consequence may have materials available for dissemination. If interested, contact the appropriate source.
- Diagnostic Resource Support Center, Ms. Mary S. White, Director, 88 Long Street, Springdale School, Birmingham, Al 36330.
- A Program for Language Development and Correction of Speech Impairments, Mr. Patrick Flanagin, Director, Marianna School District, Marianna, Ar 72360.
- Vocational Lifeline, Mr. Anthony C. Boicelli, Director, Sonoma School, 1325 Sonoma Avenue, Modesto, Ca 95335.
- Perceptual Handicapped Prescription and Resource Center, Mr. Ervin Holle, Director, Box 1420, Cortez, Co 81321.

"The materials presented herein were prepared pursuant to a Grant from the New Jersey State Department of Education under provisions of the Elementary and Secondary Education Act of 1965, Title III. However, the opinions expressed herein do not necessarily reflect the position or policy of the New Jersey State Department of Education of the United States Office of Education."

PROJECT ACTIVE
DR. THOMAS M. VODOLA
TOWNSHIP OF OCEAN SCHOOL DISTRICT
DOW AVENUE
OAKHURST, N.J. 07755

Mr. Gene A. Sanders
Pottawattamie City Sch.Sys
Route 1
Council Bluffs, Iowa
51501

Vol. I; No. 1
January/February 1976

CENTER SCENE

TODAY'S LESSON

NDN = NATIONAL DIFFUSION NETWORK

Over 100 Developer/Demonstrator Projects and 36 Dissemination Centers (State Facilitators) form a National Diffusion Network, directly funded by the U. S. Office of Education. The Wisconsin Dissemination Center for Innovative Programs is part of this network aimed at informing and assisting schools with local adoption of educational programs selected for nationwide dissemination. Less than two years old, the NDN is still evolving. This broad vision of nationally sharing educational success reveals the words of Jules Verne: "Anything one man can imagine, other men can make real."

WHAT'S HAPPENED?

Since July 1st, the Wisconsin Dissemination Center has:

* Directly contacted each Developer/Demonstrator project--nationwide and the Dissemination Centers or State Facilitators from 35 states.
* Directly met hundreds of Wisconsin educators at meetings, conferences, and presentations.
* Developed and sent a Statewide Critical Needs Survey to all 819 non-public schools and 436 public school districts of Wisconsin.
* Matched numerous nationwide projects with "surveyed" critical needs.
* Sent 900 abstract booklets "Educational Ideas That Work" to all survey respondents and other Wisconsin schools by request.
* Answered 500 Wisconsin requests for information.
* Published an article "Sharing Educational Ideas That Work" in the Wisconsin Department of Public Instruction Newsletter (December issue).
* Facilitated orientation and training steps leading to adoption of Developer/Demonstrator projects by interested Wisconsin schools.

WHO'S INVOLVED?

As a result of this effort, representatives from the following seven school districts will journey to Peotone, Illinois in mid-January for a three day awareness and training session in the projects: Early Prevention of School Failure; Positive Attitude Toward Learning; and Talents Unlimited. Each of these is designed to satisfy a critical educational need. Congratulations to these districts:

New Richmond D. C. Everest Menomonee Falls

Kaukauna McFarland St. Mary's (Durand) Watertown

ALSO

During late January, two school districts preparing to visit the alternative high school Project Focus in Roseville, Minnesota are:

Janesville and Franklin

PLACES AND PEOPLE

WISCONSIN'S OWN DEVELOPER/DEMONSTRATOR SUCCESSES

Appleton, WI
CESA 8

Artie Kearney,
Director
Ron Klatt

Drug Prevention Education trains school personnel working with students in grades two thru six. The aim is to help children feel good about themselves so they will have little or no need for drugs. Major goals are:

1. to improve children's self-image,
2. to help develop decision making skills,
3. to help develop a positive attitude towards the proper use of drugs,
4. to provide children with drug information which is relevant to their world.

Teacher Activity Packages suggest activities for value clarification, role playing, and self-concept to foster open communication between teacher and students. Student Learning Activity Packages contain ideas that students work on individually.

* * * * * * *

Green Bay, WI
CESA 9

Bob Warpinski,
Director

Project I-C-E demonstrates the improvement of instruction and curriculum in environmental education. This K-12 program offers ways for all teachers, at all grades and in all subject areas, to teach environmentally. A supplementary design incorporates environmental education into existing curricula. Directly or subtly, students gain an awareness and understanding of the vital and many-sided factors shaping our environmental attitudes and values.

Special features include:

1. a conceptual framework for each grade and subject area, and totally, K-12,
2. mini-lesson plans with objectives, skills, and suggested activities and A-V resources,
3. a strong emphasis on using the community, both urban and natural to extend and reinforce classroom learning.

* * * * * * *

Portage, WI
CESA 12

David Shearer
Marcia Shearer

The Portage Project is a home-teaching program for pre-school, multi-categorical handicapped children from birth to 6 years. Visiting each child's home for 1½ hours per week, a home teacher trains parents to become more effective teachers of their own children.

Unique reasons for project success are:

1. weekly determination of a child's successes,
2. individualized, weekly activities for continued growth,
3. the parents as teachers of their own children,
4. the home as a natural learning environment.

ACKNOWLEDGEMENT

The materials presented herein were prepared and supported in whole or in part by a Grant received from the U. S. Office of Education, Department of Health, Education and Welfare. However, the opinions expressed herein do not necessarily reflect the position or policy of the U. S. Office of Education and no official endorsement by the U. S. Office of Education should be inferred.

Waupun, WI
CESA 13

Robert Schramm,
Director

Strategies in Early Childhood Education screens all students entering kindergarten. Areas include auditory and visual perception, motor and language development. "Strategies" provides follow-up thru an individualized diagnostic-prescriptive teaching/learning center appraoch--to bridge the gap between kindergarten and first grade via a continuous growth program.

Key features are:

1. comprehensive screening with parental input,
2. individual student profiles,
3. prescriptive activities geared to the child's developmental and sequential objectives,
4. teacher's prescriptive guide,
5. growth of skills essential to reading, math, and language development.

* * * * * * * * * *

WHY RE-INVENT THE WHEEL?

DISCOVER WHAT'S AVAILABLE

See the self-mailer below for topical headings, you'll note that a wide variety of Developer/Demonstrator projects are available to local schools. 'valuated by state, regional, and then national teams, these programs have met three criteria:

1. Educational Effectiveness. These programs have proven effects on students.
2. Cost Effectiveness. They have shown reasonable costs per pupil.
3. Exportability. They are adaptable in other school settings.

---

quest free information by checking only those topical headings needed. Detach and mail.

ABSTRACTS OF NATIONALLY AVAILABLE PROGRAMS

____Administrative/Teacher Training
____Alternative Schools/Secondary
____Early Childhood/Parent Readiness
____Environmental
____Reading/Language/Math
____Specialized Curriculum/Special Interests
____Special Education/Learning Disabilities
____Wisconsin Developer/Demonstrator Projects

hool/District_____ Address_____

me_____ Position_____

***

Please share

Mr. Robert Warpinski
Project I-C-E
1927 Main St.
Green Bay, WI 54302

HOW ABOUT A DATE?

The National Diffusion Network is alive and well in Wisconsin.

Drug Education

Jan. 21 - Midland, Texas
Jan. 22 - Dallas, Texas

Project I-C-E

Jan. 12-14 - Edmond, Okla.
Jan. 16 - Port Washington, WI
Jan. 21-23 - Marion County, Ky.
Jan. 27-29 - South Bend, Ind.
Feb. 5-6 - Dallas, Texas
Feb. 12 - US Stout-Menomonee
Feb. 24 - St. Cloud, Minn.
Feb. 25 - Marshall, Minn.
Feb. 26 - Minneapolis, Minn.

The Portage Project

Jan. 19-23 - Juno, Alaska
Jan. 20-23 - Chewsville, Maryland; New Elm, Minn.; Winnepeg, Canada; Sun Prairie, WI; Hubertus, WI; Minocqua, WI; Woodruff, WI; Milwaukee, WI
Jan. 22-23 - Alberquerque, NM
Jan. 26-30 - Ill.St.Dept.of Ed.

Strategies in Early Childhood

Jan. 14 - St. Paul, Minn.
Jan. 23-27 - CESA 12
Jan. 21 - CESA 7
Jan. 26 - Dallas, Texas
Feb. 9-10-Kansas City & Pattonville, Mo.

Other Events

Jan. 15 - Environmental Education Awareness Projects ICE - KARE Schlitz Audubon Center, Milwaukee, WI

Feb. 7,14,21,28-Project HO various Iowa & Neb. site

Feb. 25 - Senior Elective Kansas City, Mo.

Place Stamp Here

_____

_____

_____

Wisconsin Dissemination Center
for Innovative Programs
6103 Johnson Street
McFarland, WI 53558

educator's FOCUS

AN ILLINOIS STATE-WIDE FACILITATOR COMMUNICATION

Vol. 1, No. 1
November, 1975

Illinois Statewide Facilitator
Project MEDIA
Title III, ESEA, Section 306
Meridian Community Unit District # 101
415 North Blanche
Mounds, Illinois 62964
(618) 745-9415 Toll Free 800-642-3992

Facilitator Staff:
Shirley M. Menendez, Director
Lloyd Sullins, Lucille Cummings,
Nancy Gunn, Margaret Grace

Superintendent: Edmund G. Bridewell
Assistant Superintendent: Gary Whitledge
Board of Education:
Cleveland Forbes, President
Dr. Marvin Powers, Secretary
Milo Thurston
Gene Cross
Harold Hargan
George Holhubner
George Floyd
Jerry G. Johnson, Superintendent, Alexander-Pulaski County ESR
Howard Keller, Assistant Superintendent, Alexander-Pulaski County, ESR

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Evaluation Staff:
Jon C. Marshall
Kathryn D. Cramer
Phillip W. Barling
Sally M. Nusbaum
Leslea J. Galyon

AN ERA PUBLICATION

Director's MEMO:

This month many Illinois educators will receive a memorandum from Shirley M. Menendez, Director of the Illinois Statewide Facilitator, Project MEDIA. This memo explains the purpose and process of the National Diffusion Network, and reads as follows:

The U.S. Office of Education has established a coordinated National Diffusion Network to assure that all schools, public and private, learn about educational programs that work. Each state chooses a **facilitator** within one of its local school districts; this office then works with **developer/demonstrator** projects all across the nation to bring to schools, within that state, validated programs funded by the Office of Education. Each state facilitator works directly with local schools to find in the network those programs or projects that seem to fit local needs.

Every product/process that the network offers to schools has been previously approved by the Dissemination Review Panel within the Education Division of the Department of Health, Education and Welfare. Hence adopting schools are assured, in advance, that the alternatives being offered by the network actually work effectively with children in learning situations. Moreover, the network provides staff development, monitoring, and follow-up support for local educators, who select one or more of the successful options currently being demonstrated and installed.

These educational innovations focus on all types of subject areas and grade levels, from early childhood/parent readiness, alternative/secondary, environmental, reading/language/math, specialized curriculum/special interests, special education/learning disabilities, through training/organizational arrangements. They vary in philosophy, in cost, and in complexity.

The approved models in the facilitator's resource pool have also been identified as adoptable models for the Title IV ESEA, Part C (Adoption/Adaption Category). All of these models are described and/or listed in the National Diffusion Network Catalog, **Educational Programs That Work**, which is available at $4.95 per copy when payment is sent to Far West Laboratory for Educational Research and Development, 1855 Folsom Street, San Francisco, California 94103.

For any further clarification on the purposes of the State Facilitator and/or DRP adoptable models, please do not hesitate to contact your state facilitator's office. Toll free number 1-800-642-3992.

newsfront

ISF (Project MEDIA) sponsored an in-service training workshop for teachers from Buncombe, Cairo, Christopher and Belnap school districts. Mr. John Davis (IOE) also attended. The workshop was held on August 21-22 at Shawnee Community College, Ullin, Illinois.

Teachers participated to become familiar with THE NEW MODEL ME developer/demonstrator project. Each of the districts represented plans to adopt THE NEW MODEL ME curriculum in their schools. Ms. Karen Stoyanoff led the training sessions.

THE NEW MODEL ME is designed to help high school students deal with how behavior develops, available alternative actions for solving personal problems, and the short- and long-range consequences of those alternatives. It is a positive, preventive approach to the study of **human behavior and aggression.**

Shirley Menendez, Director, Illinois Statewide Facilitator (left). **Karen Stoyanoff** Gifted Coordinator, Winnebago County ESR & Trainer for workshop.

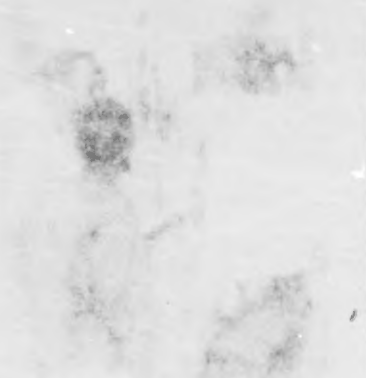
TEACHERS & STUDENTS LEARN HOW GOVERNMENT WORKS

The Institute for Political and Legal Education conducted a social studies workshop from October 6th through October 10th for high school juniors and their teachers. Thirteen school districts throughout the state of Illinois participated in the workshop. The participating 13 school districts consisted of eleven public schools and two non-public schools. Nine high school junior students were involved in the workshop.

The I-P-L-E was developed in New Jersey by the I-P-L-E staff together with school teachers and students in fourteen New Jersey districts and is funded by the New Jersey Elementary and Secondary Education Act, Title III program. The workshop trainers who were involved were also from New Jersey.

The social studies trainers spent most of the week explaining the curriculum to students and to their teachers. The social studies curriculum was divided into three parts, Voter Education, State Government, and Individual Rights. The trainers conducted simulated game activities. The New Jersey trainers also talked to students about their participation and also to their teachers as to how to implement programs.

The I-P-L-E workshop invited resource experts from different areas of government to talk to the participants. Representatives from the Democratic and Republican Parties talked to participants about Voter Education. They explained voter responsibility and election laws. Representatives from the Governor's office dealt with the subject of State Government. The representatives explained how state government operates and the Governor's role in government. Also, representatives from the Illinois State Police, the Department of Corrections, a probation officer, and a circuit judge took part in the workshop discussion. The function of all the representatives involved with the Individual Rights subject included panel discussions and question-and-answer sessions concerning criminal law.



Students and teachers conduct a Community Relations Survey (Springfield, Ill.).

ISF (PROJECT MEDIA) PARTICIPATES IN ILLINOIS TITLE IV WORKSHOPS

As a result of an invitation extended by Dr. L. Arthur Safer, State Title III. ESEA, Coordinator, Illinois facilitator staff participated in 20 Title IV workshops in the month of October. The function of Illinois Statewide Facilitator personnel was to provide input regarding adoptable models which have been approved by USOE's Dissemination Review Panel. Since a portion of Title IV, Part C emphasis is adoption/adaption of educational models, accessibility to information on such models is vital.

Catalogs have been mailed to each Superintendent of Educational Service Regions. Additional information can be obtained through the Illinois Statewide Facilitator office. (See page 4 for article on International Conference.)

Directors: Larry Million
Bev Deckard
Bill Fessler

Those of you who attended the Quincy IV Conference and would be interested in some of the Developer/Demonstrator models you saw presented, please contact your state facilitator for information on the process of ADOPTING those models. Facilitator personnel Lloyd Sullins, Lucille Cummings and Nancy Gunn made state facilitator presentations and discussed adoptions in the adoption market place.

QUINCY IV CONFERENCE
October 16 & 17, 1975

Developer/Demonstrator Presentations:

Child-Parent Centers: **An ESEA, Title I Activity**, Chicago/Director, Mrs. Dorothy Kellberg; **Intensive Reading Improvement Program**, Chicago/Director, Mrs. Florence Gottschalk; **Pre-Algebra Development Center**, Chicago/Director, Mrs. Dorothy Strong; **Project Conquest**, East St. Louis/Director, Ms. Bettye P. Spann; **Conceptually Oriented Mathematics Program**, Columbia, Mo./Director, Mrs. Alta M. Harness; **Parent-Child Early Education Program**, Ferguson, Mo./Director, Marion M. Wilson; **Strategies in Early Childhood Education**, Waupun, Wisc./Director, Robert Schramm; **Curriculum for Meeting Modern Problems**, Lakewood, Ohio/Director, John R. Rowe; **Early Prevention of School Failure**, Peotone/Director, Mrs. Lucille Werner; **Positive Attitude Toward Learning**, Bethalto/Director, Charles Pelan; **Preschool Model Parent Readiness Education Project**, Detroit, Mich./Director, Diane K. Bert; **Project Aloha**, San Jose, Calif./Director, William B. Adams; **Focus**, Roseville, Minn./Director, Ms. Sue Schillinger.

NORTHWESTERN U. PLANS WORKSHOPS FOR ILLINOIS TEACHERS

Mr. John Ittelson, Director of the Learning Resource Center, announced recently that representatives from 10 school districts will be invited to be in-serviced for adopting the MEDIA NOW Project. These sessions will be held November 13-14. Future workshops will be scheduled.

MEDIA NOW is an individualized curriculum package, developed to help junior and senior high school students learn a variety of media techniques and how to apply them. For more information, contact your state facilitator or:

Mr. John Ittelson, Director
Learning Resource Center
Northwestern University
2003 Sheridan Road
Evanston, Illinois 60207
(312) 492-3443

Facilitator•forecast

ISF (Project MEDIA) wants all Illinois educators to be aware of opportunities to create positive change in Illinois schools. Listed below are upcoming events which will introduce educators to worthwhile innovations.

Registration forms for these events are available on page 4. Contact ISF (Project MEDIA) for important events which have not yet been scheduled.

PROJECT HOPE
November 12 & 13, 1975
Southern Illinois University-Carbondale (Student Center)

Health and Optimum Physical Education--Georgia Training in planning and implementing a movement education program to improve fitness and motor skill, as well as contributing to improve self-concept (K-6).

PROJECT HOPE
November 24 & 25, 1975
Northern Illinois University-Dekalb

Health and Optimum Physical Education--Georgia Training in planning and implementing a movement education program to improve fitness and motor skill, as well as contributing to improved self-concept (K-6).

MIDWEST II EARLY CHILDHOOD CONFERENCE
December 2, 3, & 4, 1975
Belleville, Illinois

Project SEE, Union, N.J.; Home Start I, Waterloo, Iowa; Family Oriented Structured Preschool Activity, St. Cloud, Minnesota; The Cognitively Oriented Prekindergarten, West Chester, Pa.; Added Dimensions to Parent and Preschool Education, Lakewood, Colo.; Project Home Base, Yakima, Washington; Child-Parent Centers, Chicago, Ill.; Early Prevention of School Failure, Peotone, Ill.; Positive Attitude Toward Learning, Bethalto, Ill.; Strategies in Early Childhood Education, Waupun, Wisc.; Parent-Child Early Education Program, Ferguson, Missouri.

AWARENESS SESSIONS
December 8, 1975
Northern Illinois University-Dekalb

All Children Totally Involved Exercising--New Jersey Adapted physical education program for handicapped children (K-12).

EDUCATOR'S FOCUS
Illinois Statewide Facilitator
Project MEDIA
415 No. Blanche
Mounds, Illinois 62964
(618) 745-9415

Non-Profit Organization
U.S. POSTAGE PAID
Mounds, Ill. 62964
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ISF PROJECT DIRECTOR EXPLAINS NATIONAL DIFFUSION NETWORK AT INTERNATIONAL CONFERENCE

The National Diffusion Network concepts were described by Shirley Menendez, Illinois Facilitation Director at the October Lucerne (Switzerland) Seminar which was sponsored by the Illinois Association for Supervision and Curriculum Development with the assistance of the Fribourg Curriculum Research Center. ISF literature and the NDN slide presentation developed by Far West Lab of San Francisco were utilized in the presentation which was chaired by Dr. John Dunnell, Principal, Community School District No. 200, Wheaton, Illinois.

The conference, which bannered the theme "Designing Education for the Future" was keynoted by the American educator, Dr. James Aven, Senior Program Officer of the U.S. Office of Education.

REGISTRATION FORM

☐ YES, I will attend the
Please enclose $5.00 registration fee.

☐ November 12 & 13 Project HOPE Workshop at SIU-C
☐ November 24 & 25 Project HOPE Workshop at NIU
☐ December 8 Awareness Sessions at NIU

☐ NO, I am unable to atte

NAME_____ ROLE_____

SCHOOL DISTRICT_____ PHONE_____

ADDRESS_____ CITY & STATE_____

RETURN TO: Shirley Menendez, Director
Illinois Statewide Facilitator
Title III, ESEA, Section 306
Meridian Community Unit District No. 101
Mounds, Illinois 62964

Please enclose $5.00 registration f

REGISTRATION FORM

☐ YES, I will attend the December 2-4 Midwest II Early Childhood Conference in Belleville, Illinois. ☐ NO, I am unable to atte

NAME_____ ROLE_____

SCHOOL DISTRICT_____ PHONE_____

ADDRESS_____ CITY & STATE_____

RETURN TO: Midwest Conference II Early Childhood Diagnostic Center
Belleville District No. 118
1404 East Main St.
Belleville, Illinois 62221

REGISTRATION FEES:
$25—Full conference (includes 2 luncheo & Banquet)
$17—2 days or less (includes luncheon an Banquet)

Total amount enclosed $_____.
Make checks payable to: Midwest Conference II.

Part IV Program Evaluation

A. Program Awareness Evaluation

Strategies in Early Childhood Education (DD)

R.I.S.E. (Pennsylvania) (SF)

New Jersey Facilitator Conference (SF)

The EXCHANGE (Minnesota) (SF)

B. Training Workshop Evaluation

The New Model Me (DD)

Pre-Kindergarten Prescriptive Program (DD)

Project I-C-E (DD)

Diagnostic Prescriptive Arithmetic Program (DD)

Project Active (DD)

Early Childhood Preventive Curriculum (DD)

Glassboro Right-to-Read Project (DD)

Ecos Training Institute (DD)

Urban Arts Program (DD)

Dale Avenue Project (DD)

Workshop Rating Scale (DD)

C. Site Visitation Evaluation

Parent Readiness Education Project (DD)

New Adventure in Learning (DD)

Institute for Political/Legal Education (DD)

Oklahoma Facilitator Center (SF)

South Dakota Facilitator Project (SF)

Project Personnel Site Visit Report (SF)

Post-Visitation Team Guidesheet (SF)

EVALUATION
STRATEGIES IN EARLY CHILDHOOD AWARENESS CONFERENCE
CEDAR RAPIDS, IOWA -JANUARY 13th

1. Which of the following describes your position:
___Principal___Superintendent__ Curr. Supervisor/Coordinator __Classroom Teacher
__Other

2. Rate the overall usefulness of the conference

Very Worthwhile				Useless
1	2	3	4	5

3. Rate the competency of the presentors in relationship to the program they were presenting:

Highly Competent				Insufficient Expertise
1	2	3	4	5

4. Rate the Conference Pace:

Too Fast		Just Right		Too Slow
A.M. 1	2	3	4	5
P.M. 1	2	3	4	5

5. How would you have changed the emphasis to improve the conference?

	more	same	less
Discussion of techniques for achieving community support	1	2	3
Project background and philosophy discussion	1	2	3
Reviewing and creating sample lesson plans	1	2	3
Time devoted to discussion of participant concerns	1	2	3
Review of data on student results and test procedures	1	2	3
Other_____	1	2	3

6. What do you perceive as implementation problems if your district wanted to adopt/adapt this program. (Rate 1-5 with 1 being the largest concern)
____Staff acceptance of the concept
____Teacher training
____Cost
____Time
____Administrative and community acceptance
____Other_____

7. Did you expect information that you did not receive: ___YES ___NO

Comment:_____

8. Overall, what was the weakness of the conference?

Comment:_____

9. Overall, what was the strength of the conference?

Comment:_____

10. How do you feel your district will utilize the information?
____Implement parts of the program.
____Implement the total program.
____Still considering possible uses.
____Will never implement any of the program.
____It was a nice experience for those involved.
____Want additional training
____Want to go for a site visit.

11. Other comments:_____

RETURN TO: Glenn Clarkson, Iowa/Nebraska State Facilitator Projects, Riverview School
2407 Chandler Road, Bellevue, Nebraska 68005.

306-17

SF

TITLE III, 306

Evaluation of Cluster

Meeting or Conference

Date_____

Name _____ Position _____

Address _____

_____

Location of meeting _____ Date _____

1. Title or titles of Projects highlighted in Conference or Meeting

   1. _____

   2. _____

   3. _____

2. Was this meeting a value to you? Why?
   (Briefly explain)

3. What action did you take when you returned to your home district?
   (such as oral or written report to superiors, board members, etc. If written please submit.)

4. What actions do you plan to take in regard to this program and how might R.I.S.E. offer assistance to your LEA?

Please return questionnaire to Carolyn Trohoski, Assistant Director, R.I.S.E., 198 Allendale Road, King of Prussia, Pa. 19406

CONFERENCE FOR URBAN EDUCATORS

NEW JERSEY FACILITATOR CONFERENCE EVALUATION

Your cooperation in providing us with feedback on our activities helps us evaluate our work as well as develop new dissemination strategies. Please take a few minutes to complete the following:

Name: _____ School District: _____

_____ _____

Position: _____ County: _____

_____

1. Rate your experience today in each of the following categories:
(1 means least satisfaction, 5 indicates most satisfaction)

Registration - scheduling, communications	1 2 3 4 5
Importance and relevance of topic	1 2 3 4 5
Appropriateness of learning activities to your needs	1 2 3 4 5
Competence of activity leaders	1 2 3 4 5
Overall reaction to your experience	1 2 3 4 5
Your enthusiasm about attending other conferences sponsored by the New Jersey Facilitator Project .	1 2 3 4 5

2. The aspect of this conference that I liked most was:

3. My experience during this conference could have been improved if:

CONTINUED ON BACK

4. Did this conference meet the following objectives: (circle one)

a. To familiarize participants with the scope of innovative programs developed nationwide which can be adopted by urban school districts.	YES	NO
b. To offer indepth presentations of representative programs.	YES	NO
c. To familiarize participants with the New Jersey Facilitator Project.	YES	NO
d. To familiarize participants with the procedures necessary to replicate an approved project within their district.	YES	NO

5. I learned about this conference because:

_____ a. I received an invitation directly.

_____ b. Someone who had received an invitation directed it to me.

_____ c. I read about it in a newsletter.

_____ d. I learned about the conference at another meeting.

6. I would like the following names added to your mailing list: (Include name, title school address, and special interest areas)

_____

_____

_____

_____

_____

TAKING STOCK

(not to be confused with cattle rustling)

ABOUT TODAY:

I LIKED...

and I...

I DIDN'T LIKE...

A PROBLEM I HAD WHICH WAS SOLVED TODAY...

If I were running this session...

FOR NEXT TIME:

From: Adult Teacher __ Vocational Teacher __
Elementary Teacher __ Secondary Teacher __
Tutor __ Aide __ Administrator __
Public __ Private __

★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★

I would like to know more about...

I WOULD COME TO FOLLOW-UP SESSION IF...

IN MY SCHOOL/DISTRICT THERE ARE
____ MORE TEACHERS,
ADMINISTRATORS, OR ____
WHO WOULD COME TO A SESSION
SIMILAR TO THIS ONE IF OFFERED.

- YES
- NO
- MAYBE

WE WOULD BE INTERESTED IN A FOLLOW-UP TO THIS SESSION.

"Curriculum for Meeting Modern Problems"

PRESENTATION EVALUATION

Present Job: _____

Date: _____

Please respond to the numbered statements according to the following scale

Strongly disagree (SD)	Disagree (D)	Agree (A)	Strongly agree (SA)

Place the letter that best represents your position on the blank to the left of each generalization.

_____ 1. The distinction between constructive and non-constructive aggressive behavior was made clear to me.

_____ 2. I learned the key factors of human behavior as expressed in a "behavior equation."

_____ 3. I learned the relationship between the behavior equation and the curriculum.

_____ 4. I understand that this curriculum is primarily cognitive with little emphasis placed on activities in the classroom.

_____ 5. The New Model Me is affective curriculum and its teachers need to be reasonably non-judgmental with students.

_____ 6. I understand the relationship between this project as a Developer/Demonstrato and schools as Potential Adopters.

_____ 7. The primary purpose of this curriculum is to control the aggressive children who are behavior problems.

_____ 8. I understand the various ways in which The New Model Me can be implemented in a school's course of studies.

_____ 9. I know the general services performed by this project's staff to aid schools in adopting the curriculum.

_____10. The pace of this presentation was good, neither too slow nor too rapid.

_____11. This workshop showed evidence of good organization and planning.

_____12. I found the activities in this workshop interesting.

(Over)

_____13. The workshop staff demonstrated acceptance of the participants' comments.

_____14. The A-V materials were effective tools in presenting workshop ideas.

_____15. The workshop staff demonstrated expertise, clarity, and candor in answering questions.

_____16. The overview of the curriculum gave me a good understanding of the kinds of materials presented in it.

_____17. I believe that worthwhile ideas were shared during this workshop.

_____18. I am interested in learning more about this project.

_____19. I believe that The New Model Me fits some of the needs of the school(s) I represent.

_____20. I would like my school(s) staff to participate in the project's workshops.

If you wish to respond in writing, please complete the following statements.

1. The most positive feature of this workshop was ....

2. The most negative feature of this workshop was ....

3. My advice to the workshop leaders is ....

WORKSHOP EVALUATION

Circle one response (Strongly Agree, Agree, Undecided, Disagree, or Strongly Disagree) for each item.

1.	The objectives of this workshop were clear to me.	SA	A	?	D	SD
2.	The objectives of this workshop were realistic.	SA	A	?	D	SD
3.	The body of the presentation clearly met the stated objectives of the workshop.	SA	A	?	D	SD
4.	New terms that seemed unfamiliar to participants were clearly defined.	SA	A	?	D	SD
5.	The content followed a clear and logical pattern flow.	SA	A	?	D	SD
6.	The information presented helped me understand how the screening test and curriculum materials are structured and used.	SA	A	?	D	SD
7.	The information presented gave me a good idea of how the Pre-kindergarten Prescriptive Teaching Program is organized and how it operates to meet its goals.	SA	A	?	D	SD
8.	The information presented made me aware of the approximate costs of adoption.	SA	A	?	D	SD
9.	The information presented helped me realize what my districts responsibilities are in the adoption process.	SA	A	?	D	SD
10.	The information presented made me aware of what assistance the speaker is able to provide my district.	SA	A	?	D	SD
11.	The multi-media approach of the presentation was interesting.	SA	A	?	D	SD
12.	The printed materials provided for take home were informative and helpful.	SA	A	?	D	SD
13.	The speaker was enthusiastic about the project.	SA	A	?	D	SD
14.	The speaker was well-prepared and knowledgeable.	SA	A	?	D	SD
15.	The speaker maintained good eye contact with the group.	SA	A	?	D	SD
16.	The speaker responded to participants in a way that encouraged questions and discussion.	SA	A	?	D	SD
17.	The speaker was aware of times when the participants seemed confused and tried to help clarify things by restating and emphasizing pertinent points.	SA	A	?	D	SD
18.	The speaker gave closure to all discussions before moving to the next point.	SA	A	?	D	SD
19.	The speaker gave an adequate summary of the important points covered in the presentation and discussion.	SA	A	?	D	SD
20.	The speaker was not defensive.	SA	A	?	D	SD
21.	If I had it to do over again, I would attend this workshop.	SA	A	?	D	SD
22.	The workshop met my expectations.	SA	A	?	D	SD

23. I would recommend this workshop to other interested school personnel. SA A ? D SD

24. As a result of my participation in this workshop, I plan to contact the speaker for the purpose of further information exchange. SA A ? D SD

25. As a result of my participation in this workshop, I plan to take the following action when I return to my home district.

26. In your opinion, what were the major strengths of this workshop?

27. What should be improved?

28. Did you object to filling out this evaluation form? ___ yes ___ no

If yes, why?

EVALUATION
PROJECT I-C-E DEMONSTRATION PROGRAM
Ada, Oklahoma

In a continuing effort to evaluate and improve program quality and presentation mode, please rate and comment on each component used as listed below. Thank you.

	Overall Quality and Merit				
	Low				High
I. Introductions Basic I-C-E program overview "Head High in Learning" Comments:	1	2	3	4	5
II. "Man Needs His Environment" slide/tape--I-C-E concepts; discussion/activity. Comments:	1	2	3	4	5
III. I-C-E EE Guides; Implementation Strategy discussion/activity Comments:	1	2	3	4	5
IV. Field Activity Models or "Nature Field Trip" slide/tape Comments:	1	2	3	4	5
V. "Journey to a Sylvan Place" slide/tape--discussion Comments:	1	2	3	4	5
VI. Overall program summary Evaluation Comments:	1	2	3	4	5

DIAGNOSTIC PRESCRIPTIVE ARITHMETIC
WORKSHOP EVALUATION

Date_____

School District_____

_____

Workshop location_____

Workshop dates_____

Your Title_____

Grade level(s)_____

Number of students_____

General reactions to workshop_____

_____

_____

_____

_____

By circling the appropriate number, rate the following components on a scale from 1 to 5. The highest rating being 1.

The workshop prepared me to implement D.P.A. by instructing me in the following:

a)	Program background and D.P.A. philosophy	1 2 3 4 5
b)	Administering the diagnostic test	1 2 3 4 5
c)	Interpreting diagnostic test results	1 2 3 4 5
d)	Meeting individual needs through small group instruction	1 2 3 4 5
e)	Uses of concrete materials	1 2 3 4 5
f)	Uses of project activities	1 2 3 4 5
g)	Classroom management techniques	1 2 3 4 5
h)	Record keeping procedures	1 2 3 4 5
	Workshop handouts	1 2 3 4 5
	Quality of instruction provided by D.P.A. staff	1 2 3 4 5

DIAGNOSTIC PRESCRIPTIVE ARITHMETIC
WORKSHOP EVALUATION

How do you think the following people will react to the implementation of D.P.A.?

Parents_____

_____

_____

Other teachers in your school_____

_____

_____

School supervisors_____

_____

_____

Would you change anything about the workshop? Please specify.

_____

_____

_____

_____

_____

Additional comments_____

_____

_____

_____

_____

Thank you for cooperating in this survey!

6/75

INSERVICE TEACHER TRAINING PROGRAM

ESEA, Title III
Project No. 72-341

TRAINEE EVALUATION FORM

Training Site _____ Instructors _____

Date _____

Check One ☐ Motor Workshop ☐ Teacher Training Workshop ☐ Other _____ (Cite)

Directions: Please rate each phase of the training program on the basis of the rating scale on the bottom of the page.

		POINTS
A.	TEACHING MODEL KIT	
	1. Quality of the training manual(s).	_____
	2. Quality and sufficiency of the resource materials.	_____
B.	PRACTICUM EXPERIENCES	
	3. Structure of the competency-based experiences.	_____
	4. Sufficiency of the practicum experiences.	_____
	5. Variety of handicapping conditions available.	_____
	6. Quality and sufficiency of diagnostic experiences.	_____
	7. Quality and sufficiency of the prescriptive/evaluative experiences.	_____
C.	INSTRUCTORS	
	8. Clarity of the lectures.	_____
	9. Quality of the competency demonstrations.	_____
	10. Quality and sufficiency of trainee supervision, assistance, and guidance.	_____
	TOTAL	_____

COMMENTS

Outstanding Program Features	Recommendations
1.	1.
2.	2.
3.	3.

RATING SCALE

2 Poor — 4 Fair — 6 Average — 8 Good — 10 Excellent

Township of Ocean School District

Project ACTIVE Orientation Workshop

ESEA, Title III
Project No. 72-341
Project Director:
Dr. Thomas M. Vodola

EVALUATION FORM

Site: _____ Presentor(s) _____

Directions: Please rate the presentation on the basis of the rating scale on the bottom of the page.

	POINTS
1. Significance of the topic	_____
2. Quality of the lecture/lecturer	_____
3. Effectiveness of the demonstration/demonstrators (if applicable)	_____
4. Achievement of the objectives of the presentation	_____
OVERALL RATING OF THE PRESENTATION	_____

Other Comments

1. Are you interested in implementing the individualized motor activity program? _____
2. Would you be interested in participating in one of the Project ACTIVE Teacher Training Programs if it were offered in your state? _____

   If your response is in the affirmative, indicate the program desired:

   Pre-K, Low Motor Ability, Perceptual Motor Mini-program (2-8 hr. sessions) _____

   Competency-Based Teacher Training Program Maxi-program (5-8 hr. sessions) _____
3. Would you be interested in visiting the Project ACTIVE Demonstration Site in New Jersey? _____

Note: Interested parties are requested to contact the State Facilitator(s) or the Title III Coordinator in their state to make arrangements for either #2 or #3. If neither source is available, please contact:

Dr. Thomas M. Vodola
Director, Project ACTIVE
Dow Avenue
Township of Ocean School District
Oakhurst, New Jersey (201) 229-4100 Ext. 260

4. Please list your area of certification or instructional position. _____

1	2	3	4	5
Poor	Fair	Average	Good	Excellent

TRAINING SESSIONS
EARLY CHILDHOOD PREVENTIVE CURRICULUM

Place_____

Date_____

DIRECTIONS: Please respond to the questions below. Your comments will be especially important to us as we plan other inservice training sessions.

1. Do you feel you were adequately informed in advance as to the purpose of the training sessions?

2. Were you satisfied with the techniques or approaches used by the trainers in conducting these sessions?

3. Do you feel that enough information was provided in these sessions to allow you to implement this project in your own district?

-over-

GLASSBORO RIGHT-TO-READ PROJECT
Workshop Evaluation Sheet I

((To be completed by participants immediately following the workshop.)

Date_____

District_____

Position: (check one)
Teacher_____
R_2R Director_____
Administrator_____
Other_____

Workshop attended (circle one) I II III IV V VI VII

Please rate each of the following items by placing a check in the appropriate block to indicate a score of Good, Fair, Poor.

	Good	Fair	Poor
1. The purpose of the workshop was made evident.			
2. The workshop achieved the stated purpose.			
3. The presentor was sufficiently prepared			
4. A variety of materials and techniques were utilized.			
5. The training manuals were helpful.			
6. It was possible to relate the information presented to the area in which I work.			
7. The time allotted for the presentation of the information was sufficient.			
8. The suggested techniques and ideas were practical.			
9. Action steps which should be taken by you as a result of this workshop are clear.			

10. How many students in your buildings will this effect? _____

11. How many teachers?_____.

Comments:

Outstanding Features of the Workshop	Recommendations
1.	1.
2.	2.
3.	3.

SAMPLE

ECOS TRAINING INSTITUTE

Participant Reaction Form

The ECOS staff need your candid opinions on this training session in order to improve the training program with other school districts. All responses will be held in strictest confidence. Please supply the following information for comparison purposes:

_____ School District

_____ Principal Educational Role (e.g., Teacher, Supervisor, Principal, Community, other)

Check one:

No. of years of teaching/administrative experience:

_____ less than five years
_____ between five and ten years
_____ more than ten years

Grade level:

_____ elementary (K-6)
_____ secondary (7-12)

---

1. PLEASE CHECK ONLY THOSE STATEMENTS BELOW THAT T[illegible] ACCURATELY HOW YOU FELT ABOUT THIS TRAINING EXPERIENCE. READ ALL STATEMENTS BEFORE YOU BEGIN. CHECK AS MANY AS YOU THINK ACCURATELY DESCRIBE YOUR REACTIONS.

____A. It was one of the most rewarding experiences I ever had
____B. Exactly what I wanted
____C. I hope we can have another one in the near future
____D. It provided the kind of experience that I can apply to my own situation
____E. It helped me personally
____F. It solved some problems for me
____G. I think it served its purpose
____H. It had some merits
____I. It was fair
____J. It was neither very good nor very poor
____K. I was mildly disappointed
____L. It was not exactly what I needed
____M. It was too general
____N. I am not taking any new ideas away
____O. It didn't hold my interest
____P. It was much too superficial
____Q. I leave dissatisfied
____R. It was very poorly planned
____S. I didn't learn a thing
____T. It was a complete waste of time

11. IF YOU CHECKED ANY ITEMS BETWEEN K and T, PLEASE ELABORATE ON YOUR NEGATIVE RESPONSE BELOW:

111. PLEASE RATE THIS TRAINING INSTITUTE BY CIRCLING ONE NUMBER FROM 1 to 5 FOR EACH OF THE FOLLOWING CATEGORIES:

A. PURPOSE: Was the purpose of the workshop made clear to you:

5 4 3 2 1
very clear unclea

COMMENT:

B. CONTENT: Was the content or substance of this workshop appropriate to you?

5 4 3 2 1
appropriate inappropr

COMMENT:

C. COVERAGE: Did the workshop cover everything you felt should be covered?

5 4 3 2 1
comprehensive superfic

COMMENT:

D. INSTRUCTIONS: Were the instructions given, easily understood

5 4 3 2 1
easily understood ambiguo

COMMENT:

E. ORGANIZATION: How well was the workshop organized?

5	4	3	2	1
very well				not well at all

COMMENT:

F. ACCOMPLISHMENTS: Do you feel that the workshop accomplished what it set out to do?

5	4	3	2	1
met its objectives				did not meet objectives

COMMENT:

G. PRACTICALITY: Were the practical applications of the process evident?

5	4	3	2	1
quite evident				not evident

COMMENT:

H. HAND-OUTS: Were the hand-outs sufficiently helpful?

5	4	3	2	1
quite helpful				not at all helpful

COMMENT:

IV. PLEASE RATE THIS TRAINING INSTITUTE BY CIRCLING ONE NUMBER FROM 1 TO 5 FOR EACH OF THE FOLLOWING CATEGORIES:

A. PACE: How was the pace at which the material was presented?

5	4	3	2	1
very slow		just right		too fast

COMMENT:

B. LEVEL OF DIFFICULTY: How would you rate the workshop?

5	4	3	2	1
too elementary		just right		too difficult

COMMENT:

C. SIZE: Was the number of trainees participating in the workshop satisfactory for conducting workshops?

5	4	3	2	1
too small		just right		too large

COMMENT:

D. ACTIVITIES: Were there enough hands-on activities?

5	4	3	2	1
not enough		just right		too much

COMMENT:

E. INTERACTION: Was there adequate time for sharing of ideas or group interaction?

5	4	3	2	1
not enough interaction		just right		too much interaction

V. PLEASE RATE THE FOLLOWING CONCEPTS ON THE BASIS OF HOW WELL THEY WERE EXPLAINED. CIRCLE ONE NUMBER FROM 1 TO 5 FOR EACH OF THE FOLLOWING:

Concepts	Excellent				Poo
1. Adoption Level I - - - - - - - - - - - - - - -	5	4	3	2	1
2. Adoption Level II - - - - - - - - - - - - - - -	5	4	3	2	1
3. Community-School Interaction - - - - - - -	5	4	3	2	1
4. Environmental Stewardship- - - - - - - - -	5	4	3	2	1
5. Infusion - - - - - - - - - - - - - - - - - - -	5	4	3	2	1

OVERALL REACTION TO WORKSHOP:

7	6	5	4	3	2	1
Good						Poor

THINGS LIKED BEST:

THINGS THAT COULD BE IMPROVED:

GENERAL COMMENTS:

First Adoption Workshop

URBAN ARTS PROGRAM
Dissemination Workshop Evaluation

Your Code _____

Please rate the following workshop procedures as to their value to you as a potential adopter of any or all of the Urban Arts Program.

		High				Low
A.	DAY I					
	1. Assessment of the needs of students, artists, school and community in making a better arts program.	1	2	3	4	5
	2. Anticipated value of assessment model.	1	2	3	4	5
	3. Assessment of available resources within the school and community.	1	2	3	4	5
	4. Simulation/planning session involving teachers, administrators, and artists in planning an arts project.	1	2	3	4	5
	DAY II					
	5. Visitation of potential sites for urban arts activity.	1	2	3	4	5
	6. Discussion of potential site attributes.	1	2	3	4	5
	7. Simulation/planning session on program development and implementation costs.	1	2	3	4	5

B. Now please rate the following general aspects of the workshop as to their contributions to you.

	High				Low
1. Extent to which workshop met your needs for information.	1	2	3	4	5
2. Effect of the workshop on your interest to adopt the U.A.P.	1	2	3	4	5
3. Effectiveness of the workshop leadership in conveying information:					
a. director.					
b. artist.	1	2	3	4	5
4. Effectiveness of workshop leadership in relating to participants:					
a. director.					
b. artist.	1	2	3	4	5
5. The value of the "Adopting Urban Arts" Handbook.	1	2	3	4	5

	High				Low
6. Adequacy of workshop arrangements.	1	2	3	4	5
7. The probability of your continuing with U.A.P. workshops.	1	2	3	4	5

(Please indicate any conditions relating to the probability of your continuing)

(_____)

(_____)

C. Suggestions for workshop improvement.

1. Assessment of needs and resources: _____

_____

_____

2. Viewing and cost discussion of potential sites: _____

_____

_____

3. Workshop information materials, leadership, arrangements: _____

_____

_____

Urban Arts Program Dissemination Workshop Evaluation

(To be offered to participants at conclusion of workshops)

Please take a few minutes to respond to the questions on this sheet -- No additional comments on the back of the page. Thank you!

Listed below are three workshop objectives. Under each objective is a rating scale ranging from one (1) to four (4).

1 = The workshop did not meet the objective
4 = The workshop met the objective

For each objective, please circle the number that is closest to your thinking in respect to the workshop meeting the objective.

1. To provide workshop participants with full awareness of Urban Arts Program.

   1 2 3 4

2. To clearly describe the Program and how it operates.

   1 2 3 4

3. To provide sufficient information about the Urban Arts Program for participants to have the ability to implement a similar program at their own sites.

4. Do you intend to attempt implementation of this type of program in your own location?

   ____ Yes ____ No ____ Don't Know

5. What was/were your reason(s) for participating in the workshop?

   _____

6. Was/were your objective(s) realized?

   ____ Yes ____ No If no, why not?

   _____

7. How did you learn of the Urban Arts Program Dissemination Workshop?

   _____

8. Was Workshop leadership satisfactory?

   ____ Yes ____ No If no, what needs to be improved?

   _____

9. Were Workshop arrangements satisfactory?

   ____ Yes ____ No If no, what needs to be improved?

   _____

QUESTIONNAIRE FOR DALE AVENUE MODEL WORKSHOPS

PLEASE CHECK ONE BOX FOR EACH QUESTION

1. The Dale Avenue overview presentation plus information in the Final Report helped me to understand the development and dissemination plan of the Dale Avenue Project.

   ☐ completely ☐ adequately ☐ inadequately

2. I understand:

   a. how to make the Dale Avenue Skill Assessment Test:

      ☐ completely ☐ adequately ☐ inadequately

   b. how to administer Peabody Picture Vocabulary Test:

      ☐ completely ☐ adequately ☐ inadequately

   c. how to administer Skill Assessment Test:

      ☐ completely ☐ adequately ☐ inadequately

   d. how to administer Identity & Body Parts Checklist:

      ☐ completely ☐ adequately ☐ inadequately

   e. how to score Peabody Picture Vocabulary Test:

      ☐ completely ☐ adequately ☐ inadequately

   f. how to score Skill Assessment Test:

      ☐ completely ☐ adequately ☐ inadequately

   g. how to score Identity & Body Parts Checklists:

      ☐ completely ☐ adequately ☐ inadequately

3. I understand how to administer:

   a. Listening Performance Objective Test:

      ☐ completely ☐ adequately ☐ inadequately

   b. Naming Performance Objective test:

      ☐ completely ☐ adequately ☐ inadequately

   c. Speaking Performance Objective Test:

      ☐ completely ☐ adequately ☐ inadequately

   d. Math Performance Objective Test:

      ☐ completely ☐ adequately ☐ inadequately

   e. Perceptual Motor Performance Objective Test:

      ☐ completely ☐ adequately ☐ inadequately

   f. Classification Performance Objective Test:

      ☐ completely ☐ adequately ☐ inadequately

   g. Seriation Performance Objective Test:

      ☐ completely ☐ adequately ☐ inadequately

(Note: Observation, Decoding & Writing and Motor Skills areas are self explanatory.)

4. I understand:

   a. how to make the Classification Performance Objective Kit for testing:

      ☐ completely ☐ adequately ☐ inadequately

5. I know how to:

   a. record screening test data (from Identity & Body Parts Checklists & Skill Assessment Test) into record book.

      ☐ completely ☐ adequately ☐ inadequately

   b. record Performance Objective active pretest data (Listening, Naming, etc.) into record book.

      ☐ completely ☐ adequately ☐ inadequately

   c. record Performance Objective information indicating what children have learned in my classroom into record book.

      ☐ completely ☐ adequately ☐ inadequately

   d. record summary sheet information from student's work of the previous year into record book (remembering for reinforcement to drop back two items in everything but Naming).

      ☐ completely ☐ adequately ☐ inadequately

   e. record summary sheet information from student's work of the previous year onto September column of Parent Reporting Form (remembering to drop two items in everything but Naming. The Naming column is left blank until children are retested.)

      ☐ completely ☐ adequately ☐ inadequately

6. The workshops were:

   ☐ a little too long ☐ just long enough ☐ not long enough

7. Workshop participants were involved:

   ☐ too little ☐ an adequate amount ☐ too much

8. Dale Avenue Performance Objectives are a pre and posttest.

   ☐ true ☐ false

   Dale Avenue Performance Objectives are small increments of learning.

   ☐ true ☐ false

   Dale Avenue Performance Objectives are skeleton curriculum.

   ☐ true ☐ false

   Dale Avenue Performance Objectives are a device to help group and individualized instruction.

   ☐ true ☐ false

   Dale Avenue Performance Objectives are a device to help habilitate learning disabilities.

   ☐ true ☐ false

   Dale Avenue Performance Objectives are a device to help each pupil develop at his own pace and to his potential.

   ☐ true ☐ false

9. Which ideas presented at the workshop for teaching Performance Objectives will be particularly helpful to you when you use them this fall?

10. Please express your own ideas of the worth of the three-day Dale Avenue Model Workshops.

Position

WORKSHOP RATING SCALE

Please respond honestly and candidly to the following evaluation form. The individual items are designed to provide information which will assist in the improvement and refinement of future workshops. Thanks!

	YES	NO	CANNO RESPO
1. Were the goals and/or objectives of the workshop clearly and explicitly defined? State briefly the primary purpose of the workshop as you perceive it to be.	○	○	○
2. Was the content (ideas, information, suggestions, etc.) of the workshop clearly and logically organized?	○	○	○
3. Was there adequate time for the presentation?	○	○	○
4. Was the time available for the workshop efficiently and effectively utilized?	○	○	○
5. Were you previously familiar with most of the activities, ideas, suggestions, and/or techniques presented?	○	○	○

6. Please list the three (3) most useful activities, ideas, suggestions, and/or techniques presented which you intend to implement in your classroom.

(1) _____ (3) _____

(2) _____

7. Please specify any activities, ideas, suggestions, and/or techniques which you fee are not useful to you.

_____

_____

8. Please rate the value of this specific workshop on the following scale (5 = very valuable; 1 = no value).

5	4	3	2	1
○	○	○	○	○

9. What suggestions do you have for future workshops?

_____

_____

PARENT READINESS EDUCATION PROJECT
REDFORD UNION SCHOOL DISTRICT

VISITOR REACTION RECORD

NAME_____ DATE_____

WHAT IS YOUR JOB TITLE?_____ PHONE_____

ADDRESS_____ CITY_____ STATE____ ZIP_____

Where did you learn about this innovative project?_____

What was your overall reaction?_____

What parts of this program have the most appeal to you?_____

What techniques or information which you have seen and heard today will you be able to utilize?_____

Do you have any questions which were not answered by the PREP staff members?
No___ Yes___ If yes, please specify_____

Do you have any suggestions or comments which you would like to share with us?_____

Is there any way the PREP staff could be of assistance to you?_____

VRR75

NAIL

DEMONSTRATION CENTER
OBSERVATION CHECK SHEET

Welcome to W. T. Moore School's New Adventure In Learning Project! We are happy to be able to share ideas and have you observe our program in action.

* * * * *

Today during your tour of observation in project centers you should see:

1. Pupils working independently.
2. Small group instruction.
3. Pupil self-direction.
4. Pupils helping other pupils.
5. Oral language lessons.
6. Pupils using prescriptions.
7. Pupils evidencing enjoyment.
8. Evidence of teacher / team planning.
9. Evidence of diagnosis.
10. Examples of positive reinforcement.

* * * * *

Stop, look and listen,
Our program and centers to see.

But please don't bother the
teachers,
They're busy as can be!

EVALUATION OF ON–SITE VISIT

Please answer the following questions after you have completed your visit with us so that we may be of better service to others. Thank you.

	YES	NO
1. Were you accepted by the staff and made to feel welcome?	○	○
2. Were you able to obtain enough help to make your visit profitable?	○	○
3. Did you have enough background information before you went into the classrooms?	○	○
4. Did you find information that would be helpful to you during this visit?	○	○
5. Is there any way you could have received more from your visit?	○	○

Please explain _____

_____

_____

6. Further comments or suggestions:

_____

_____

_____

_____

QUARTERLY QUESTIONNAIRE: IPLE CLASS 1975/76

Please complete and mail to IPLE office by closing date of each evaluation period:

Institute for Political/Legal Education
P.O. Box 426
Pitman, New Jersey 08071

Check appropriate reporting period: Nov. 15_____ Jan. 30_____
Mar. 30_____ June 15_____

I. GENERAL INFORMATION

A. Teacher _____

B. School _____

C. State/County _____

D. Number of students in IPLE Class _____

Grade level(s) of students in class (number in each)

_____ 9th
_____ 10th
_____ 11th
_____ 12th

E. Check IPLE curriculum component(s) covered in this reporting period & rate effectiveness on a scale of 1 to 5 (1 being most effective to 5 being least effective)

	Voter Education	Rating
_____	Voter Registration	_____
_____	Canvassing	_____
_____	Campaigning	_____
_____	Simulated Election	_____
_____	Issue Analysis Center	_____
_____	Election Information Center	_____
_____	Campaign Registration Center	_____

	Government: The Decision-Making Process	
_____	Local government study	_____
_____	County government study	_____
_____	State government study	_____
_____	Lobbying	_____
_____	Social research project	_____
_____	Community project	_____
_____	Simulations	_____
_____	Model Congress	_____

Individual Rights/Fair Trial v. Free Press	Rating
_____ Foundations of law	_____
_____ Fair Trial v. Free Press	_____
_____ Free speech	_____
_____ Case studies	_____
_____ Moot courts	_____
_____ Simulations (Tinker)	_____

II. WORKSHOPS (if applicable) (This includes follow-up sessions with IPLE staff)

A. List workshops offered:

1. Attended:

   a. Yes ____ No ____
   (If not, why?)

   b. Alone ____ With students ____
   Number of students _____

2. Your evaluation and/or students' evaluation of workshop if applicable

	Poor	Fair	Adequate	Good	Excellent
Consultant knowledge					
Information presented					
Methods of presentation					
Handouts					
Overall evaluation					

3. Were you able to integrate this experience and material into the classroom? Yes _____ No _____
If so, how (please be specific)?

II. TEACHING STRATEGIES

A. Role playing and simulations

1. List specific simulations used and rate effectiveness of each from 1 to 5 (1 being most effective to 5 being least effective)

2. To what extent did you use this method in your classroom?

_____Regularly _____Occasionally

_____Seldom _____Never

3. How effective as a teaching strategy?

_____Poor _____Fair _____Adequate _____Good

_____Excellent

B. Audio Visual

List films and filmstrips you used and found particularly helpful.

C. Peer Teaching

1. To what extent did you use students as para-professional teachers in the classroom?

_____Regularly _____Occasionally _____Seldom _____Never

2. In what situations did you find peer teaching to be most effective (be specific)?

D. Case Studies

1. To what extent did you use the case study method in your class (i.e. facts--issues--decision--opinion)?

___Regularly ___Occasionally ___Seldom ___Never

2. List some specific examples of case studies which were most effective:

E. Value Surveys

1. To what extent did you use value surveys to introduce particular political/legal topics in class and motivate discussion?

___Regularly ___Occasionally ___Seldom ___Never

2. Specific examples of value surveys which were found effective:

IV. COMMUNITY AS THE CLASSROOM

A. Community Projects

1. List specific projects, describe briefly, and give number of students participating and results.

2. Rate effectiveness of each project on scale of 1 to 5 (1 being most effective to 5 being least effective)

B. Community Service (e.g. working with League of Women Voters, Chamber of Commerce, etc.)

1. List specific projects, describe briefly, and give number of students participating and results.

2. Rate effectiveness of each project on scale of 1 to 5 (1 being most effective to 5 being least effective)

C. Political Activities

Were any of your students involved in political activities?

_____Yes _____No

1. Voter registration drive	Yes	No
in school	___	___
out of school	___	___
total number registered	_____	

2. Campaigns
   number of students _____
   types of activities

3. Others (add as necessary)

D. Interning

Were any of your students involved in interning opportunities?

____ Yes ____No

If so,

1. How many? _____

2. Where (be specific)?

3. How often? _____

4. How useful as a learning experience?

___Very ____Somewhat ____Little

5. What effect on the community? Comments:

E. Field trips

1. Did you arrange field trips? ____Yes ____No
   If so, list locations.

2. Rate effectiveness of each on scale of 1 to 5

3. Further Comments

F. Resources (professionals) brought in the classroom:

Did you invite resource personnel into the class to discuss legal questions? ____ Yes ____No
If so,

1. Who (specify)?

2. How effective?

____Excellent ____Good ____Adequate ____Fair ____Poor

3. How was initial contact made?

V. CURRICULUM GUIDES

A. Usefulness as teacher guides (for information, activities, etc.)

	Poor	Fair	Adequate	Good	Excellent
Voter Education					
State Government					
Individual Rights					
Fair Trial v. Free Press					

B. Usefulness as resource material for students:

	Poor	Fair	Adequate	Good	Excellent
Voter Education					
State Government					
Individual Rights					
Fair Trial v. Free Press					

C. What specific topics, cases and/or chapters did you use in your class? To answer this question, use table of contents (attached) of the four curriculum guides and circle each topic covered by your students.

VI. EVALUATION

A. IPLE testing:

1. How was the pre- and/or post-testing handled?

2. Were there any problems with implementation?

3. Suggestions and/or comments:

B. Your own evaluation of students:

1. How did you evaluate students in your class (check as many as apply)?

_____ Tests

_____Outside written papers

_____Degree of involvement in activities outside class

_____Other (specify)

2. If you have examples of tests, student contracts, etc., used in your evaluation which you would be willing to share with IPLE, please include.

3. Site evaluation of program (check applicable method(s)

1. _____ Observed by IPLE staff: Date _____

2. _____ Visited by IPLE liaison: Name _____

Date _____

3. _____ Sent video tape or recording of class to IPLE office Date _____

VII. SUGGESTIONS FOR NEXT COMPONENT AND/OR NEXT YEAR

Please write your candid comments on your needs to implement the IPLE program. Be specific in your suggestions.

A. Teacher Training

B. Consultations with Institute Staff

C. Liaison with your state's IPLE liaison and/or other schools in the program

D. Curriculum materials

E. Workshops

F. Other

THANK YOU FOR YOUR COOPERATION!

OKLAHOMA FACILITATOR CENTER
REPORT OF VISIT TO D/D AND CLAIM FOR TRAVEL REIMBURSEMENT

1. APPLICANT NAME

2. DATE

School Corp. or Non-Public School

3. Program Visited

Street Address P. O. Box

4. Location of Program Visited

City County

5. Date(s) of Visitation

State Zip Code

6. Number of Visitors for whom reimbursement is claimed.

7. Strengths of Program

Weaknesses of Program

8. Decision by LEA (please check the appropriate box)

( ) We want to become an Adopter/Adapter School for the Approved program.

( ) We do not want to become an Adopter/Adapter School for the Approved program, but would like to examine other Approved programs. Please send Forms OFC-01 and OFC-

( ) We want to terminate our investigation for the time being.

9. I certify that the information contained in this document is true and correct to the best of my knowledge and belief.

Typed name and title of Chief School Officer Signature of Chief School Officer

MAIL FORM TO:

Mr. Jess Butler, SF
Edmond Public Schools
1216 South Rankin
Edmond, OK 73034

VISITATION EVALUATION

TO: South Dakota Educators

FROM: Anna Maravelas
ESEA Title III
804 North Euclid
Pierre, South Dakota 57501
(605) 224-3395

We would appreciate it if you would return this form with your voucher for re-imbursement. Since it's not feasible for us to visit all the Developer/ Demonstrator projects, we rely on people like you to keep us informed of their appropriateness and value.

Is the literature of the project an accurate description of what the project is about in reality?

Do you feel that this project would be of value to other school districts whose needs reflect the concept?

The experience you had at the project is most appropriate for what level of educators? (Superintendents, teachers, principals, students?)

Do you see any immediate or long term changes coming about in your district as a result of this trip?

PROJECT PERSONNEL SITE VISIT REPORT

Form AD-3

NAME _____

DD SITE ☐

ROLE _____

ADAPTATION SITE ☐

DATE _____

Project Site Unit Report to be completed after visitation and/or inservice at a DD site or in monitoring adapter project.

Average _____

ADAPTER PROJECT

DD PROJECT _____

District _____

_____

Superintendent _____

_____

Contact Person _____

Inservice ☐ YES ☐ NO

Type ☐ LEA ☐ ESR ☐ NI

Visitation Only ☐ YES ☐ NO

Adopted Model _____

_____

_____

1. General Impression

Low / Average / High

1 2 3 4 5

2. Objective related to practice.

Low / Average / High

1 2 3 4 5

3. Quality of Process

Low / Average / High

1 2 3 4 5

4. Recommendations

_____

_____

_____

_____

_____

5. Comments

_____

_____

_____

_____

_____

Name of Project visited _____

POST VISITATION TEAM GUIDE SHEET
(De-briefing)

1. Conduct a de-briefing session with your visitation team, considering the following items:

   a. Overall reaction in terms of your expectations? In what ways did the D/D program fail to fulfill your expectations? Did the D/D program conform to the descriptive materials you examined prior to the visit?

   b. Were your questions satisfactorily answered? What questions were not answered?

   c. Did you have adequate opportunity:

      _____ for observing the program in action?

      _____ to talk with teachers? children? administrators? parents?

      _____ to verify or invalidate your initial impressions of the programs?

      _____ to ask questions?

   d. Would this program or a reasonable adaption of it appear to be an appropriate way of dealing with the priority need(s) you identified as a reason for making the visit?

   e. Do you wish to adopt/adapt the program? If not, why not?

2. What arrangements have you made for reporting your findings to your school board, administrators you report to, or other appropriate audiences?

NAME OF SCHOOL DISTRICT _____

NAME OF PERSON COMPLETING GUIDE SHEET _____